

Coopers Lane Primary School



Personal and Intimate Care Policy

Author / Checked : Tonia Pancucci

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A Coopers Lane Learner...



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1) **Rationale**

At Coopers Lane School, we have a primary responsibility for the care, welfare and safety of all pupils in our charge and we are committed to practice that protects children from harm. Our Personal and Intimate Care Policy has been developed to safeguard all children and those members of staff who support them, underpinning the core values of respect, dignity, individual rights, choice, independence and inclusion.

At Coopers Lane we believe that:

- Every child has the right to be safe.
- Every child has the right to express their views on their own intimate care and to have such views taken into account.
- Every child has the right to have levels of intimate care that are as consistent as possible.
- Every child has the right to personal privacy.
- Every child has the right to be valued as an individual.
- Every child has the right to be treated with dignity and respect.
- Every child has the right to be involved and consulted in their own intimate care to the best of their abilities.

Intimate care may be defined as any activity required to meet the personal care needs of each individual child in partnership with the parents / carers and children in the following areas:

- Assisting a child to change his/her clothes
- Changing or washing a child who has soiled him / herself
- Assisting with toileting issues/menstrual care
- Supervising a child involved in intimate self-care
- Providing first aid assistance
- Providing comfort to a child who is upset or distressed
- Feeding a child
- Providing oral care to a child
- Assisting a child who requires a specific medical procedure and who is not

able to carry this out unaided. In the case of a specific procedure only a person suitably trained and assessed as competent should undertake the procedure.

2) Roles and Responsibilities:

It is the parents' responsibility to advise the school of any known intimate care needs relating to their child and to pass on all relevant medical information.

All staff delivering intimate care must have a current enhanced Disclosure and Barring Service (DBS) check.

All staff must be trained in the specific types of intimate care that they carry out, and fully understand our school's Personal and Intimate Care Policy which will be followed at all times. School will agree the intimate care arrangements with parents/carers and the child, as appropriate.

Staff should not undertake any aspect of intimate care that has not been agreed with the parents/carers and child beforehand; however, in exceptional circumstances, e.g. if the child has a toileting accident, appropriately trained staff will make a decision to provide intimate care in such circumstances. Parents/carers will be notified as soon as is possible.

Only in emergency would staff undertake any aspect of intimate care that has not been agreed by parents and school.

Parents would then be contacted immediately. The views of all relevant parties should be sought and considered to inform future arrangements

If a staff member has concerns about a colleague's intimate care practice, or any other concern they must report this immediately to the Designated Safeguarding Lead, Paul Hooper (Head Teacher). Please also see our Safeguarding Policy.

School will provide a suitable place for changing children and meeting individual pupils' needs hygienically, efficiently and privately. Staff will be fully aware of best practice regarding infection control, including the requirement to wear disposable gloves and aprons where appropriate.

3) Principles

All children have the right to be safe and to be treated with dignity and respect. Children with additional needs could be especially vulnerable; staff involved with their intimate care will be sensitive to their individual needs.

We will always involve the child in their intimate care as far as possible, encouraging their growing independence. We will talk with our pupils about what is going to be done, and give them choices wherever possible, acknowledging their likes and dislikes and incorporating their preferences as much as we can. We will always ensure privacy appropriate to the child's age and specific needs. We will work with parents and carers to further develop a child's independence with their self-care as

appropriate to their needs.

A pupil's intimate care needs are often carried out by one staff member with one child, as previously agreed with parents/carers. The practice of providing one-to-one intimate care for children is supported unless the activity requires two persons for the greater comfort and safety of the child.

Some children may have several members of staff to support his/her intimate care needs, a consistent approach to care is essential. Effective communication between parents/carers/ outside agencies will ensure that practice is consistent.

It is the responsibility of all staff caring for a child to ensure that they are aware of the child's preferred method and level of communication, e.g. words, signs and symbols, It is also the responsibility of all staff to establish any specific cultural needs. All staff will seek advice and guidance from the Inclusion Leader as necessary in order to establish and maintain effective communication with pupils who require support.

If staff are concerned in any way, parents will be sent for and asked to assist their child and informed if the child becomes distressed.

4) Good Practice Guidelines

All children have the right to be safe and to be treated with dignity and respect. These guidelines are designed to safeguard children and staff. They apply to every member of staff involved with the intimate care of children. Young children and children with special educational needs can be especially vulnerable. Staff involved with their intimate care need to be particularly sensitive to their individual needs.

Members of staff also need to be aware that some adults may use intimate care, as an opportunity to abuse children. It is important to bear in mind that some forms of assistance can be open to misinterpretation.

Adhering to the following guidelines of good practice should safeguard both children and staff.

1. Involve the child in the intimate care. Try to encourage a child's independence as far as possible in his or her intimate care. Where a situation renders a child fully dependent, talk about what is going to be done and, where possible, give choices. Check your practice by asking the child or parent about any preferences while carrying out the intimate care.
2. Treat every child with dignity and respect and ensure privacy appropriate to the child's age and situation.
3. Make sure practice in intimate care is consistent. As a child may have multiple carers a consistent approach to care is essential. Effective communication between all parties ensures that practice is consistent.
4. Be aware of your own limitations. Only carry out activities you understand and feel competent with. If in doubt, ask. Some procedures must only be carried out by members of staff who have been formally trained and assessed.

5. Promote positive self-esteem and body image. Confident, self-assured children who feel their bodies belong to them are less vulnerable to sexual abuse. The approach you take to intimate care can convey lots of messages to a child about their body worth. Your attitude to a child's intimate care is important. Keeping in mind the child's age, routine care can be both efficient and relaxed.
6. If you have any concerns, you must report them. If you observe any unusual markings, discolouration or swelling report it immediately to the Designated Safeguarding Lead. If a child is accidentally hurt during intimate care or misunderstands or misinterprets something, reassure the child, ensure their safety and report the incident immediately to the designated teacher. Report and record any unusual emotional or behavioural response by the child. A written record of concerns must be made available to parents and kept in the child's personal file.

5) Working with Children of the Opposite Gender

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 boys and girls can be carried out by a member of staff of the opposite sex 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/curtains 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 Lead and make a written record.
- Parents must be informed about any concerns.

6) Communication With Children

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 individual needs, children may communicate using different methods - words, signs, symbols, body movements, 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; and
- Treat the child as an individual with dignity and respect.

7) Basic hygiene routines

- Always wear protective disposable gloves.
- Seal any soiled clothing in a plastic bag for return to parents.

In the case of Foundation Stage children, in order to avoid any unnecessary distress, a member of staff may assist the child, without another colleague in attendance, unless a parent has requested otherwise or if the child is reluctant.

Parents will be contacted as soon as it is practical to do so.

8) Changing a child who has soiled themselves

If a child soils themselves in school a professional judgement has to be made whether it is appropriate to change the child in school or request the parent/carer to collect the child for changing.

In either circumstance the child's needs are paramount, and he/she should be comforted and reassured throughout.

The following guidelines outline our procedures, but we will also seek to make age-appropriate responses.

- The child will be given the opportunity to change his / her underwear in private and carry out this process themselves.
- School will have a supply of wipes, clean underwear and spare uniform for this purpose. (A supply of clean underwear and spare uniforms are available in the medical room).
- If a child is not able to complete this task unaided, school staff will attempt to contact the emergency contact to inform them of the situation.
- If the emergency contact is able to come to school within an appropriate time frame, the child will be accompanied and supported by a staff member until they arrive. This avoids any further distress and preserves dignity.
- If the emergency contact cannot attend, school will seek verbal permission for staff to change the child. If none of the contacts can be reached the head teacher is to be consulted and the decision taken on the basis of loco-parentis and our duty of care to meet the needs of the child.
- The member of staff who has assisted a pupil with intimate care will complete the intimate care form (Appendix 1).

9) Providing comfort or support to a child

There are situations and circumstances where children seek physical comfort from staff, particularly children in Early Years and some pupils with additional needs. Where this happens, staff need to be aware that any physical contact must be kept to a minimum. When comforting a child or giving reassurance, staff must ensure that at no time can the act be considered intimate. If physical contact is deemed to be appropriate, staff must provide care which is professionally appropriate to the age and context.

If a child touches a member of staff in a way that makes them feel uncomfortable this can be gently but firmly discouraged in a way which communicates that the touch, rather than the child, is unacceptable. If a child touches a member of staff, as

noted above, this should be discussed, in confidence with the Designated Safeguarding Lead.

Assisting a child who requires a specific medical procedure and who is not able to carry this out unaided.

- Our Administration of Medications Policy outlines arrangements for the management of the majority of medications in school.
- Parental permission must be given before any medication is dispensed in school- this form is also available on our website.
- A small number of children will have significant medical needs and in addition to the arrangements included in our Administration of Medications Policy will have an Individual 'Care Plan'.
- This Care Plan will be formulated by the relevant medical body.
- If required, school staff will receive appropriate training.

10) Swimming

Children participate in a swimming programme at Downham Leisure Centre. 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 regard to health and safety considerations and to ensure that bullying, teasing or other unacceptable behaviour does not occur.

The children change in large communal changing rooms and there will be a minimum of 1 school adult in each changing room at all times.

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 but increase independence.

11) Residential Trips

ALL PUPILS WILL BE BRIEFED ON SAFEGAURDING ISSUES PRIOR TO THE TRIP

Educational visits are an important part of our Pupils' school experience.

Particular care is required when supervising pupils in this less formal setting. As with Extra-Curricular Activities, although more informal relationships in such circumstances tend to be usual, staff are still guided by our Child Protection procedures.

Some specific Intimate Care issues may arise in a Residential context.

Showering – ON SCHOOL TRIPS

Children are entitled to respect and privacy when changing their clothes or taking a shower. However, there must be the required level of supervision to safeguard young people with regard to health and safety considerations, and to ensure that bullying, teasing or other unacceptable behaviour does not occur.

This means that staff should announce their intention of entering changing rooms, avoid remaining in changing rooms unless pupil needs require it, avoid any physical contact when children are in a state of undress and avoid any visually intrusive behaviour.

Given the vulnerabilities of the situation, it is strongly recommended that when supervising children in a state of undress, another member of staff is present. However, this may not always be possible and therefore staff need to be vigilant about their own conduct, e.g. adults must not change in the same place as children or shower with children.

It is best practice in our school that when an incident has taken place that has necessitated a member of staff to be present when children are changing that an incident report is made.

Night Time Routines

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.

At bedtime, children are given a set amount of time to change and prepare for bed and will be told when the supervising teachers will visit the rooms to check all is okay and switch off the lights. A reciprocal arrangement is in place in the mornings. There are occasions when incidents take place during the night and the need arises to:

1. Assist a child to change his / her clothes
2. Change a child who has soiled him / herself
3. Provide comfort to an upset or distressed child
4. 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.

This policy should be read in conjunction with other school policies including:

- Safeguarding
- Health and Safety
- Supporting Pupils with Medical Needs

Appendix 1

Coopers Lane School
Parental Permission for Intimate Care

Should it be necessary, I give permission for:

_____ to receive intimate care (e.g. help with changing or following toileting).

I understand that staff will endeavour to encourage my child to be independent. I understand that I will be informed discretely should the occasion arise.

I also understand that there may be occasions when intimate care is only undertaken by one staff member as stated in the school Personal and Intimate Care Policy.

Signed:

Date:

Adult with parental responsibility for:

Signed:

Head Teacher

Date:

Appendix 2

Coopers Lane School

For children wearing nappies or pull-ups in school

Name of child:

DOB:

Completed by:

Date of plan:

Review date:

Aim

The aim is to ensure that your child feels comfortable, safe and cared for during a change of nappy and/or clothing. All staff will follow our procedure which will respect the young person's feelings. This is agreed with parents/carers.

Who will change the young person?

How will the young person be changed? e.g. standing up in a toilet cubicle, lying down on a mat on the floor or on a changing table?

Who will provide the resources? e.g. wipes, nappies, PPE?
What PPE will be used and under what circumstances?

How will wet/soiled clothes be dealt with?

How will the young person be encouraged to participate in the procedure?

Any other comments / important information: e.g. *medical information*

This plan has been discussed with me and I agree to change my daughter/ son at the last possible moment before she/he comes to school, provide the resources indicated above and encourage her/ his participation in toileting procedures at home as appropriate as discussed and where possible.

Parent/Carer's full name:

Date:

Signature:

Signed on behalf of the school
member of staff:

Name of

Role:

Date: