



**Lodge Farm Primary School**

## **Intimate Care Policy**

**Reviewed April 2024**

## **Introduction**

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

Children's dignity will be preserved and a high level of privacy, choice and control will be provided to them. Staff that provide intimate care to children have a high awareness of safeguarding issues. Staff will work in partnership with parents/carers to provide continuity of care.

## **Definition**

Intimate care is any care which involves washing, touching or carrying out an invasive procedure to intimate personal areas. In most cases, such care will involve procedures to do with personal hygiene and the cleaning of associated equipment as part of the staff member's duty of care. In the case of specific procedures, only the staff suitably trained and assessed as competent should undertake the procedure (e.g. the administration of rectal diazepam).

## **Our Approach to Best Practice**

The management of all children with intimate care needs will be carefully planned. The child who requires care will be treated with respect at all times; the child's welfare and dignity is of paramount importance.

Staff who provide intimate care are fully aware of best practice. Suitable equipment and facilities will be provided to assist children who need special arrangements following assessment from the appropriate agencies.

It is essential that the adult who is going to change the child informs the teacher and/or another member of staff that they are going to do this. There is no written legal requirement that two adults must be present. However, in order to be completely secure against any risk, a second member of staff will be present where resources allow.

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 or menstruation. 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 they are able.

Individual intimate care plans will be drawn up for children as appropriate to suit the circumstances of the child. (Appendix A)

Each child's right to privacy will be respected. Careful consideration will be given to each child's situation to determine how many carers will need to be present when the child is toileted. Wherever possible the child should be cared for by an adult of the same sex. However, in certain circumstances this principle may need to be waived where the failure to provide appropriate care would result in negligence. E.g. female staff supporting boys in our school, if no male staff are available.

Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the child's personal 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.

### **The Protection of Children**

Safeguarding Procedures and Multi-Agency Protection procedures will be adhered to. Where parents do not co-operate with intimate care agreements, concerns should be raised with the parents in the first instance. A meeting may be called that could possibly include the health visitor and head teacher to identify the areas of concern and how all present can address them. If these concerns continue, there should be discussions with the school's safeguarding co-ordinator about the appropriate action to take to safeguard the welfare of the child.

If any member of staff has concerns about physical changes to a child's presentation, e.g. marks, bruises, soreness etc. S/He will immediately report concerns to the appropriate designated person for safeguarding.

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 the process in order to reach a resolution; staffing schedules will be altered until the issue(s) are resolved.

All staff will be required to confirm that they have read the 'Intimate Care Policy and Guidance' document.

This should be read alongside

[www.thegrid.org.uk](http://www.thegrid.org.uk) › [documents](#) › [continence\\_guidance\\_for\\_early\\_years\\_coping\\_with\\_incontinence](#),

[www.eric.org.uk/](http://www.eric.org.uk/)

## **Care Plan Agreements**

Where a pupil has particular needs (e.g. wearing nappies or pull-ups regularly, or has continence difficulties which are more frequent than the odd 'accident', staff will work with parents/carers (and health visitors/school nurse, if appropriate) to set out a care plan to ensure that the child is able to attend daily.

In these circumstances it may be appropriate for the school to set up an agreement that defines the responsibilities that each partner has, and the expectations each has for the other. This will include:

### **The parent:**

- Agreeing to ensure that the child is changed at the latest possible time before being brought to the setting/school.
- Providing the setting/school with spare nappies or pull ups and a change of clothing.
- Understanding and agreeing the procedures that will be followed when their child is changed at school –including the use of any cleanser or wipes.
- Agreeing to inform the setting/school should the child have any marks/rash.
- Agreeing to a 'minimum change' policy i.e. the school would not undertake to change the child more frequently than if s/he were at home.
- Agreeing to review arrangements should this be necessary.

### **The school:**

- Agreeing to change the child during a single session should the child soil themselves or become uncomfortably wet.
- Agreeing how often the child would be changed should the child be staying for the full day.
- Agreeing to monitor the number of times the child is changed in order to identify progress made.
- Agreeing to report should the child be distressed, or if marks/rashes are seen.
- Agreeing to review arrangements should this be necessary.

This kind of agreement will help to avoid misunderstandings that might otherwise arise, and help parents feel confident that the setting/school is taking a holistic view of the child's needs.

Should a child with complex continence needs be admitted, the school will consider the possibility of special circumstances and/or provision being made. In such circumstances, an appropriate health care professional (School Nurse or Family Health Visitor) will be closely involved in forward planning.

## **Personal Care Procedures**

The staff will follow agreed procedures (see Appendix C) when attending to the care or continence needs of any pupil within the setting, whether this be a child with a care plan agreement or a child who has had an occasional 'accident'.

## **Health and Safety Procedures**

When dealing with personal care and continence issues, staff will follow agreed health and safety procedures (see Appendix D) to protect both the child and the member of staff.

## **Monitoring and Review**

- The SENCOs will take responsibility for monitoring that agreed procedures are being followed and are meeting the needs of children and families.
- It is the SENCOs' responsibility to ensure that all practitioners follow the school policy.
- Any concerns that staff have about child protection issues will be reported to the Designated Safeguarding Lead (DSL)
- This policy runs alongside other school policies, particularly Safeguarding Children, SEND, and Health and Safety.

Appendix A



**Individual Intimate Care Plan**

Name of child	
Name of person(s) to change the child:	
Name of person(s) to change the child if main adult unavailable:	
Where changing will take place:	
What resources and equipment will be used:	
Who will provide the resources and equipment that will be used:	
Training requirements for staff:	
Disposal of product in:	
Infection control measures:	
Special arrangements for trips/ outings:	
When will the plan be reviewed:	
Review comments:	

If the child is unduly distressed, a member of staff will contact the parent/carer.

*\*If the above named member of staff is not available due to illness or staff training, then another person, familiar to the child will attend to the child's needs.*

SENCO approval:

.....Date.....



## Lodge Farm Home – School Intimate Care Agreement

### The parent will

- ensure that the child is changed at the latest possible time before being brought to the school
- provide the school with spare nappies or pull ups and a change of clothing
- understand and agrees with the procedures that will be followed when their child is changed at school –including the use of any cleanser or wipes
- inform the setting/school should the child have any marks/rash
- agree to a 'minimum change' policy i.e. the school would not undertake to change the child more frequently than if s/he were at home.
- agree to review arrangements should this be necessary

### The school will

- change the child during a single session should the child soil themselves or become uncomfortably wet
- agree how often the child would be changed should the child be staying for the full day
- monitor the number of times the child is changed in order to identify progress made
- report should the child be distressed, or if marks/rashes are seen
- review arrangements should this be necessary.

Parent signed .....

Date.....

Teacher

signed.....Date.....

## ***APPENDIX C***

### **Personal Care Procedures**

The staff will follow agreed procedures:

- Change the child's clothing as appropriate, as soon as possible
- Inform another member of staff that they are to perform intimate care
- Use appropriate cleaning products and adhere to health and safety procedures (see Appendix D)
- Report any marks or rashes to parents and Head Teacher if appropriate
- Inform parent/carer that a continence issue has arisen during the session
- Contact a parent/carer only where soiling is severe and/or linked to illness eg. sickness and diarrhea, or when a child refuses to let a member of staff help change their clothing.

## ***APPENDIX D***

### **Health and Safety Procedures**

When dealing with personal care and continence issues, staff will follow agreed health and safety procedures:

- Staff to wear disposable gloves and aprons while dealing with the incident
- Soiled continence product used to be double wrapped and placed in appropriate bin.
- Changing area to be cleaned after use
- Hot water and liquid soap available to wash hands as soon as the task is completed
- Paper towels available for drying hands.