

LANGTOFT PRIMARY SCHOOL

Intimate Care Policy

1. Introduction

- 1.1 The *Intimate Care Policy* at Langtoft Primary School recognises that all adults may be involved in duties which require intimate care of children. As the need arises, staff are expected to carry out such a procedure whilst children are in their care. Staff responsible for the intimate care of children will undertake their duties in a professional manner at all times.
- 1.2 The school takes seriously its responsibility to safeguard and promote the welfare of the children in its care. The Governing Body recognises its duties and responsibilities in relation to the Equality Act 2010 which requires that any child with an impairment that affects his/her ability to carry out normal day-to-day activities must not be discriminated against.
- 1.3 Staff recognise the need for children to be treated with respect when intimate care is given. No child shall be attended to in a way that causes distress, embarrassment or pain.
- 1.4 Staff will work in close partnership with parents and carers to share information and provide continuity of care.
- 1.5 Procedures have been adopted with consideration to Department for Education Guidance including *Keeping Children Safe In Education (2018)* and *Working Together To Safeguard Children (2018)*.

2. What is intimate care?

- 2.1 Intimate care covers any task that involves the washing, touching or carrying out of a procedure to intimate areas of the body. It is associated with bodily functions and personal hygiene, including toileting, washing and dressing.
- 2.2 Intimate care is a sensitive issue and will require staff to be respectful of a child's needs. The child's dignity should always be preserved with a high level of privacy, choice and control.
- 2.3 There should be a high level of awareness of safeguarding issues. Staff behaviour must be open to scrutiny and staff should work in partnership with parents/carers to provide continuity of care to children wherever possible.

3. Who will undertake intimate care?

- 3.1 Intimate care is only to be carried out by employed staff and not visitors, volunteers or parents/carers other than the child's own. In most circumstances, the child's regular teaching assistant will be responsible for changing them; however, this is not always possible, so another member of staff may need to carry out the procedure. As no

person other than employed staff (and the child's own parent/carer) are allowed to change children, the child will know who is changing them and will have seen them before.

- 3.2 The experience is made as pleasant as possible for the child by ensuring that they are spoken to at all times, provided with as many opportunities to be independent and praised for this. This can be used as an opportunity to chat to the child about their learning experiences that day, count or sing songs, for example.
- 3.3 Whenever possible, another staff member should stay close by while the procedure is carried out, but does not need to stand as a 'witness' to the procedure.
- 3.4 A parent or carer will be called if i) a child refuses staff assistance or ii) a child is unduly distressed by the experience. The parent/carer may be asked to take the child home if the child is distressed or unwell.

4. Where will the intimate care take place?

- 4.1 Intimate care will usually take place in the toilets which are private enough to respect the child's dignity but also allow the adult to be seen at all times.
- 4.2 No adult will be left alone with a child behind a fully closed door when carrying out intimate care procedures. This is to safeguard both the child and the adult.

5. What safeguarding procedures will be followed?

- 5.1 Staff members will follow the school's policies for *Safeguarding* and for *Child Protection*. If a member of staff notices marks, injuries, bruising or undue soreness, the staff member will record and share their concern with the school's Designated Safeguarding Lead immediately after completing the intimate care procedure.

6. What is the procedure for changing a child?

- i. Ascertain the child has had an accident
- ii. Offer to help the child to change their clothes and make themselves clean
- iii. Seek out a second adult to provide support
- iv. Ensure all changing equipment and resources are to hand
- v. Staff take the child to the designated changing area (usually the toilets) and establish that the child is happy and comfortable with being changed by talking to the child throughout and telling them what they are about to do before each step
- vi. Reassure the child and make changing an enjoyable time from beginning to end by chatting and/or singing
- vii. Staff to put on a disposable plastic apron to protect their clothing from contamination. Disposable gloves are recommended to be worn. Please note, the use of disposable gloves is not a substitute for good hand hygiene and hands must still be washed at the end of the procedure
- viii. Staff to encourage the child to undress independently where possible. If adult help is needed, the adult is to remove only the clothes required to reach soiled underpants unless further soiling has occurred and the child needs to be

- changed fully. Adult to remove the soiled pants, double-bag in a sanitary bag and place into the sanitary bin
- ix. Child's skin is to be cleaned with disposable wipes (by the child whenever possible) and also disposed of in a sanitary bag in the sanitary bin
 - x. Child to be dressed, or encouraged to dress in clean clothes if soiled. Dirty clothes to be put into a plastic bag and given to parents/carers when the child is picked up at the end of the day. Staff members will not attempt to wash or rinse the clothes
 - xi. Staff to oversee the child wash their hands.
 - xii. Staff to determine if changing area should be wiped with anti-bacterial spray and dried after use.
 - xiii. Staff to wash and dry their hands following the procedure, after glove removal and before leaving the changing area.
 - xiv. In the Early Years Foundation Stage class, all intimate care procedures carried out are recorded on the Intimate Care log and signed by the person carrying out the procedure, detailing the procedure carried out and any additional notes, for example, if child was upset or a rash was present. The second adult supporting the procedure will also sign the log. The parent/carer responsible for collecting the child from school that day will be informed of the need to carry out intimate care at the end of the school day.
 - xv. In Key Stage 1 and Key Stage 2 the need to carry out an intimate care procedure is rarer and so the staff member will notify the parents/carers by telephone directly and in person and inform them that intimate care of their child has been necessary. The staff member must inform the child's class teacher and/or a member of the office staff before making the telephone call.
 - xvi. Class teachers should consider creating an individual healthcare plan for children who require regular changing. (See *Supporting Pupils with Medical Conditions Policy* for an example). This should be written and agreed by parents/carers and staff and signed by both.

7. Monitoring and Review

- 7.1 Staff members will make leaders aware of any issues arising the delivery of intimate care so that the policy may be reviewed. The headteacher will recommend revisions to the policy to the *Well-being and Provision Committee* as they arise and no later than October 2020.