

BROOK PRIMARY SCHOOL
Intimate Care policy

1.0 INTRODUCTION

- 1.1 Staff who work with young children or children 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, (the changing of children in the event of them being wet or soiling or to prevent this) and menstrual management as well as more ordinary tasks such as help with washing or bathing. Occasionally, this may mean dealing with first aid which involves the genital area (parental agreement will be sought in the first instance but if the parent is unavailable or the situation is an emergency then appropriate action will be taken to help the child)
- 1.3 Children's dignity will be preserved and a high level of privacy, choice and control will be provided to them. Staff who provide intimate care to children have a high awareness of child protection issues. Staff behaviour is open to scrutiny and staff at Brook School work in partnership with parents/carers to provide continuity of care to children/young people wherever possible. (Parents will be called if there are minor injuries to the genital area.)
- 1.4 Staff deliver a full personal safety curriculum, as part of Personal, Social and Health Education, to all children as appropriate to their developmental level and degree of understanding.
- 1.5 Brook 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. Brook 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.
- 1.6 On residential trips the school will always try to ensure that a male member of staff/CRB checked volunteer attends, if no male member of staff/CRB checked volunteer is available, a male first aider will be sought at the trip site to attend to first aid/intimate care issues for boys. Where only one gender of first aider is available and medical needs prevail the most appropriate action will be taken to help the child

Amendment: May 2020 - COVID-19 Pandemic:

Under the current Government arrangements for the Covid-19 pandemic, schools may be required to open to more children from June 1st 2020 if the infection rate (R) remains below 1 and the 5 key Government targets have been met. School will also remain open for Key worker children.

To ensure the safety of children, staff and families, necessary Local Authority risk assessments will be in place alongside more specific to Brook safety measures that have been carefully considered. These include:

- Reduced contact between children and staff - group sizes of 15 that will be kept away from other groups
- Allocation of the same staff to a group as far as possible
- Groups to remain in the same classroom throughout the day including isolated, staggered break times and lunch times
- Thorough cleaning - shared resources (if they cannot be individualised), frequent cleaning of surfaces that children touch, including toys
- Ensure frequent hand washing and hand sanitizing
- No use of outdoor equipment

However, School cannot guarantee that the recommended 2mtr social distancing rule can be adhered to at all times especially when dealing with a child requiring intimate care support.

If a child requires intimate care during the COVID-19 phased return to school:

- Staff to wear additional PPE when supporting pupils with toileting routines - mask, gloves, apron
- Gloves to be worn and hands washed afterwards
- If there is a risk of bodily fluid splashing, eye protection should also be worn
- All changing surfaces to be cleaned before and after each use
- Nappies/soiled items to be disposed of in yellow bags
- Staff to follow specific intimate care procedures (see policy)
- Any soiled clothes are put into a plastic bag (double bagged) and sent home.

As a result, safe practices are followed and the risk of infection is reduced for staff and pupils.

2.0 APPROACHES AND PRACTICES:

- 2.1 All children who require intimate care are treated respectfully at all times; the child's welfare and dignity is of paramount importance. Relevant information regarding a child needing intimate care will be gathered from the parents/ care giver to ensure that needs are met appropriately.
- 2.2 Staff who provide intimate care are fully aware of best practice. Young children will be changed in an appropriate environment, using appropriate equipment, e.g. changing mats, use of a potty, use of the care room facilities. Apparatus will be provided to assist with children who need special arrangements following assessment from physiotherapist/ occupational therapist as required and staff will be trained accordingly.
- 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, potty training, the onset of puberty and menstruation. Wherever possible staff involved in the intimate care of children will not usually be involved with the delivery of sex and relationship education to the same children as an additional safeguard to both staff and children involved.
- 2.4 There is careful communication with each child 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 should be made aware of each procedure that is carried out and the reasons for it.
- 2.5 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 wiping/washing themselves. (Individual intimate care plans/risk assessments will be drawn up for particular children, with SEND as appropriate, to suit the circumstances of the child.)
- 2.6 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 needs help with intimate care. Where possible one child will be cared for by one adult unless there is a sound reason for having two adults present. This is to protect their privacy and dignity. At least one other member of staff should be aware when someone is involved in an intimate care task.
- 2.8 Parents/carers of young children will be made aware of the changing arrangements should their child wet or soil themselves. Parents/carers of children with SEND will review their child's intimate care arrangements with the school 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.

3.0 THE PROTECTION OF CHILDREN

- 3.1 Safeguarding/Education Child Protection Procedures and Inter-Agency
Safeguarding/Child Protection procedures will be accessible to staff and adhered to. In line with our school safeguarding Child Protection policy no adult will take a mobile phone or any other recording equipment into the room/environment where a child is being changed.
- 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 and appropriate action will be taken. Records will be kept via the CPOMs system.
- 3.5 If a child makes an allegation against a member of staff, all necessary procedures will be followed as detailed in our safeguarding policy and Dudley's Allegations Against Staff and Volunteers procedure.

Policy Review:

The Intimate Care Policy was formulated in 2014

The Intimate Care Policy was reviewed in December 2016, November 2018, March 2020