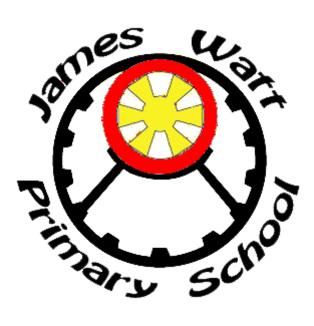
# **James Watt Primary School**



# **EYFS Intimate Care Policy**

Policy approved:	12 <sup>th</sup> October 2023
Review Date:	October 2024
Signed (Chair of Governors):	

### **EYFS Intimate Care Policy**

#### 1) Principles

- 1.1 The Governing Body will act in accordance with Section 175 of the Education Act 2002 and the Government guidance 'Keeping Children Safe in Education' (2015) to safeguard and promote the welfare of pupils at this school.
- 1.2 This school takes seriously its responsibility to safeguard and promote the welfare of the children and young people in its care. Meeting a pupil's intimate care needs is one aspect of safeguarding.
- 1.3 The Governing Body recognises its duties and responsibilities in relation to the Equalities Act 2010 which requires that any pupil with an impairment that affects his/her ability to carry out day-to-day activities must not be discriminated against.
- 1.4 This intimate care policy should be read in conjunction with the schools' policies as below (or similarly named):
  - safeguarding policy and child protection procedures
  - staff code of conduct and guidance on safer working practice
  - 'whistle-blowing' and allegations management policies
  - health and safety policy and procedures
  - Special Educational Needs policy

Plus

- Birmingham City Council moving and handling people guidance note
- policy for the administration of medicines
- 1.5 The Governing Body is committed to ensuring that all staff responsible for the intimate care of pupils will undertake their duties in a professional manner at all times. It is acknowledged that these adults are in a position of great trust.
- 1.6 We recognise that there is a need to treat all pupils, whatever their age, gender, disability, religion, ethnicity or sexual orientation with respect and dignity when intimate care is given. The child's welfare is of paramount importance and his/her experience of intimate and personal care should be a positive one. It is essential that every pupil is treated as an individual and that care is given gently and sensitively: no pupil should be attended to in a way that causes distress or pain.
- 1.7 Staff will work in close partnership with parent/carers and other professionals to share information and provide continuity of care.
- 1.8 Where pupils with complex and/or long term health conditions have a health care plan in place, the plan should, where relevant, take into account the principles and best practice guidance in this intimate care policy.
- 1.9 Staff for whom it is part of their job description (or commensurate to their job grade) are responsible for providing intimate care.

1.10 This Intimate Care Policy has been developed to safeguard children and staff. It applies to everyone involved in the intimate care of children.

#### 2) <u>Child focused principles of intimate care</u>

The following are the fundamental principles upon which the Policy and Guidelines are based:

- Every child has the right to be safe.
- 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.
- 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.

#### 3) <u>Definition</u>

- 3.1 Intimate care can be defined as any care which involves washing, touching or carrying out a procedure to intimate personal areas which most people usually carry out themselves but some pupils are unable to do because of their young age, physical difficulties or other special needs. Examples include care associated with continence as well as more ordinary tasks such as help with washing, toileting or dressing.
- 3.2 It also includes supervision of pupils involved in intimate self-care.

#### 4) Best Practice

- 4.1 Pupils who require regular assistance with intimate care have written Single Page Profiles, health care plans or intimate care plans agreed by staff, parents/carers and any other professionals actively involved, such as school nurses or physiotherapists. A risk assessment should be carried out when care is about to be taken by school staff. Ideally the plan should be agreed at a meeting at which all key staff and the pupil should also be present wherever possible/appropriate. The profile or care plan should be reviewed as necessary. They should also take into account procedures for educational visits/day trips.
- 4.2 Where relevant, it is good practice to agree with the pupil and parents/carers appropriate terminology for private parts of the body and functions and this should be noted in the plan.
- 4.3 Where a care plan or Single Page Profile is **not** in place, parents/carers will be informed the same day if their child has needed help with meeting intimate

care needs (eg has had an 'accident' and wet or soiled him/herself). It is recommended practice that information on intimate care should be treated as confidential and communicated in person by telephone or by letter.

- 4.4 Accurate records should also be kept when a child requires assistance with intimate care; these can be brief but should, as a minimum, include full date, times and any comments such as changes in the child's behaviour. It should be clear who was present in every case.
- 4.5 These records will be kept in the child's file and available to parents/carers on request.
- 4.6 All pupils will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each individual pupil to do as much for his/herself as possible.
- 4.7 Staff who provide intimate care are trained in personal care (eg health and safety training in moving and handling) according to the needs of the pupil. Staff should be fully aware of best practice regarding infection control, including the requirement to wear disposable gloves and aprons where appropriate.
- 4.8 Staff will be supported to adapt their practice in relation to the needs of individual pupils taking into account developmental changes such as the onset of puberty and menstruation.
- 4.9 There must be careful communication with each pupil who needs help with intimate care in line with their preferred means of communication (verbal, symbolic, etc) to discuss their needs and preferences. Where the pupil is of an appropriate age and level of understanding permission should be sought before starting an intimate procedure.
- 4.10 Staff who provide intimate care should speak to the pupil personally by name, explain what they are doing and communicate with all children in a way that reflects their ages.
- 4.11 Every child's right to privacy and modesty will be respected. Careful consideration will be given to each pupil's situation to determine who and how many carers might need to be present when s/he needs help with intimate care. SEND advice suggests that reducing the numbers of staff involved goes some way to preserving the child's privacy and dignity. Wherever possible, the pupil's wishes and feelings should be sought and taken into account.
- 4.12 The religious views, beliefs and cultural values of children and their families should be taken into account, particularly as they might affect certain practices or determine the gender of the carer.
- 4.13 Whilst safer working practice is important, such as in relation to staff caring for a pupil of the same gender, there is research which suggests there may be missed opportunities for children and young people due to over anxiety about risk factors; ideally, every pupil should have a choice regarding the member of staff. There might also be occasions when the member of staff

has good reason not to work alone with a pupil. It is important that the process is transparent so that all issues stated above can be respected; this can best be achieved through a meeting with all parties, as described above, to agree what actions will be taken, where and by whom.

- 4.14 Adults who assist pupils with intimate care should be employees of the school, not students or volunteers, and therefore have the usual range of safer recruitment checks, including enhanced DSB checks.
- 4.15 All staff should be aware of the school's confidentiality policy. Sensitive information will be shared only with those who need to know.
- 4.16 Health & Safety guidelines should be adhered to regarding waste products, if necessary, advice should be taken from the BCC Procurement Department regarding disposal of large amounts of waste products or any quantity of products that come under the heading of clinical waste.
- 4.17 No member of staff will carry a mobile phone, camera or similar device whilst providing intimate care.

#### 5) Partnership with parents

- 5.1 Staff at James Watt Primary School will work in partnership with parents/carers and any other professionals involved in the child's care, to provide care appropriate to the needs of the individual child and together will produce a care plan.
- 5.2 Parents/Carers are asked to supply the following:
- Spare nappies/pull ups
- Wipes, nappy sacks etc.
- Spare clothes
- Spare underwear

This policy was adopted by the Governing Body on	(Date)
It will be reviewed	(Date)
(NB recommendation - on a yearly cycle)	

#### Child's Name: \_\_\_\_\_

Class: \_\_\_\_\_

Date of Risk Assessment:

	Yes	Notes
1. Does weight /size/shape of pupil present a risk?		
2. Does communication present a risk?		
3. Does comprehension present a risk?		
4. Is there a history of child protection concerns?		
5. Are there any medical considerations? Including pain/discomfort?		
6. Has there ever been allegations made by the child or family?		
7. Does moving and handling present a risk?		
8. Does behaviour present a risk?		
<ol> <li>Is staff capability a risk? (back injury/ pregnancy)</li> </ol>		
Are there any risks concerning individual capability (Pupil)?		
General Fragility		
Fragile bones		
Head control		
□ Other		
10. Are there any environmental risks?		
Heat/Cold		

If Yes to any of the above complete a detailed personal care plan.

Child's Name						
Date of Birth			Age			
Gender:   Male  Female						
Class			Class Teacher			
Completed by:			(member of staff)			
Date of plan:	Date of plan: Date to review plan:					
Type of care required	d					
Nappy changing		Pull ups ch	anging			
Assistance to char	nge clothes	after soiling				
Other, please stat	e:					
Who will change the	e child?					
How will the child be changed? Example, standing up in a toilet cubicle, lying down on a mat on the floor or changing table.						
Additional equipmer	nt required					
□ No □ Yes Please state:						
Who will provide the	e resource	s?				
Nappies	□ Parer	nts 🗆 Sch	ool			
Pull ups	D Parer	nts 🗆 Sch	ool			
Nappy sacks	D Parer	nts 🗆 Sch	ool			
Wipes	D Parer	nts 🗆 Sch	ool			
Disposable gloves	D Parer	nts 🗆 Sch	ool			
Spare clothes	D Parer	nts 🗆 Sch	ool			
Spare underwear	□ Parer	nts 🗆 Sch	ool			
How will the changing occasions be recorded and if/ how this will be communicated to						
child's parent/ carer	?					

Agree a minimum number of changes

How will the child be encouraged to participate in the procedure? (What can the child do for themselves?)

Any other comments/ important information, eg. medical, religious or cultural information

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

Signed: \_\_\_\_\_

Parent/ Carer's Full Name: \_\_\_\_\_

## **Record of Intimate Care Intervention Form**

# Child's Name: \_\_\_\_\_ Sheet No:

Date	Time	Care/Intervention undertaken	Concerns	Signature of staff member	Print name