



# Repton Manor Primary School

## Intimate Care Policy March 2024

Policy lead	Hannah Ferris
Date approved by Governing Body	March 2023
Governor signature	
Review date	March 2024

## Principles

- The Governing Body will safeguard and promote the welfare of pupils at Repton Manor Primary School.
- Repton Manor Primary School takes seriously its responsibility to safeguard and promote the welfare of the children in its care. Meeting a pupil's intimate care needs is one aspect of safeguarding.
- 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.
  
- This intimate care policy should be read in conjunction with the schools' policies as below
  - *Safeguarding and Child Protection Policy, Staff Code of Conduct*
  - *'Whistle-blowing' and Allegations Policies*
  - *Health and Safety Policy*
  - *Special Educational Needs and Disability Policy*
  
- Repton Manor Primary School 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.
- 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.
- Staff will work in close partnership with parent/carers and other professionals to share information and provide continuity of care.
- 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.
- Members of staff must be given the choice as to whether they are prepared to provide intimate care to pupils.
- All staff undertaking intimate care must be given appropriate training within the school.
- This Intimate Care Policy has been developed to safeguard children and staff. It applies to everyone involved in the intimate care of children.

### **Child focused principles of intimate care**

- 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.

### **Definition**

- 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 and menstrual management as well as more ordinary tasks such as help with washing, toileting or dressing.
- It also includes supervision of pupils involved in intimate self-care.

### **Best Practice**

- Pupils who require regular assistance with intimate care have written Health Care Plans/Risk Assessments agreed by staff, parents/carers and any other professionals actively involved, such as school nurses or physiotherapists. Ideally the plan should be agreed at a meeting at which all key staff and the pupil should also be present wherever possible/appropriate. Any historical concerns (such as past abuse) should be taken into account. The plan should be reviewed as necessary, but at least annually, and at any time of change of circumstances, e.g. for residential trips or staff changes (where the staff member concerned is providing intimate care). They should also take into account procedures for educational visits/day trips.
- 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.
- Where a care plan 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 or by telephone.
- In relation to record keeping, a written record should be kept in a format agreed by parents and staff every time a child has an invasive medical procedure, e.g. support with catheter usage (see afore-mentioned multi-agency guidance for the management of long term health conditions for children and young people).
- An agreement should be made when a child requires assistance with intimate care; the detail and method are recorded in the child's Health Care Plan/Risk Assessment. This agreement will be signed by Parent/Carer.
- 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.
- 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 wearing disposable gloves and aprons where appropriate.
- 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.
- 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.
- 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.
- 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. SEN 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.
- 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.
- 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.

- 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 DBS checks.
- All staff should be aware of confidentiality. Sensitive information will be shared only with those who need to know.
- Health & Safety guidelines should be adhered to regarding waste products.
- No member of staff will carry a mobile phone, camera or similar device whilst providing intimate care.

### **Child Protection**

- The Governors and staff at this school recognise that pupils with Special Educational Needs and Disabilities are particularly vulnerable to all types of abuse.
- The school's child protection procedures will be adhered to.
- From a child protection perspective, it is acknowledged that intimate care involves risks for children and adults as it may involve staff touching private parts of a pupil's body. In this school best practice will be promoted and all adults (including those who are involved in intimate care and others in the vicinity) will be encouraged to be vigilant at all times, to seek advice where relevant and take account of safer working practice.
- Where appropriate, pupils will be taught personal safety skills carefully matched to their level of development and understanding.
- If a member of staff has any concerns about physical changes in a pupil's presentation, e.g. unexplained marks, bruises, etc s/he will immediately report concerns to the Designated Safeguarding Lead. A clear written record of the concern will be completed and followed in line with the Safeguarding and Child Protection Policy.
- If a pupil, or any other person, makes an allegation against an adult working at the school this should be reported to the Headteacher (or to the Chair of Governors if the concern is about the Headteacher) who will follow procedures in accordance with our Allegations against staff policy and statutory safeguarding guidance.
- Similarly, any adult who has concerns about the conduct of a colleague at the school or about any improper practice will report this to the Headteacher or to the Chair of Governors, in accordance with the child protection procedures and 'whistle-blowing' policy.