



INTIMATE CARE POLICY

Alderman Cogan's is a Voluntary Aided, Church of England Primary School offering a comprehensive Christian primary education to families in East Hull.

The School is a caring community built on Christian values and beliefs, which permeate all aspects of School life. The curriculum, including the National Curriculum, is presented within a Christian world view. Such a world view gives perspective and meaning to all learning at Alderman Cogan's.

We seek to foster the God given talents and gifts amongst children, staff and governors for the service of each other, the school, the wider community and the Glory of God. Our aim is that all children reach their full potential, not just academically, but also spiritually, physically, socially, and aesthetically.

This is the context in which this policy is written.

This policy was written in the Spring Term 2017 and will be reviewed in the Spring Term 2019

INTIMATE CARE POLICY

The pastoral care of our children is central to the aims, ethos and teaching at Alderman Cogan's CE Primary School and we are committed to developing positive and caring attitudes in our children.

It is our intention to develop independence in each child, however there will be occasions when help is required. The principles and procedures apply to everyone involved in the intimate care of children.

Alderman Cogan's CE 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 our children with respect when intimate care is given. No child should be attended to in a way that causes distress or pain and adults and staff must be sensitive to each child's individual needs.

Intimate care is any care which involves one of the following:

1. Assisting a child to **change his/her clothes**
2. **Changing or washing a child** who has soiled him / herself
3. Assisting with **toileting** issues
4. Supervising a child involved in **intimate self-care**
5. Providing **first aid** assistance
6. **Providing comfort** to an upset or distressed child
7. **Feeding** a child
8. Providing **oral care** to a child
9. Assisting a child who requires a specific **medical procedure** and who is not able to carry this out unaided. *

* In the case of a specific procedure only a person suitably trained and assessed as competent should undertake the procedure. Parents have the responsibility to advise the school of any known intimate care needs relating to their child

PRINCIPLES OF INTIMATE CARE

The following are the fundamental principles of intimate care upon which our policy guidelines are based:

- Every child has a 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;
- All children have the right to be involved and consulted in their own intimate care to the best of their abilities;
- All children have the right to express their views on their own intimate care and to have their views taken into account; and

- Every child has the right to have levels of intimate care that are appropriate and consistent.

CHANGING CLOTHES

Assisting a child to change his / her clothes

On occasions an individual child may require some assistance with changing if, for example, he / she has an accident at the toilet, gets wet outside, or has vomit on his / her clothes etc. Staff will always encourage children to attempt undressing and dressing unaided. However, if assistance is required this will be given. Staff will always ensure that they have a colleague in attendance when supporting dressing/undressing and will always give the child the opportunity to change in private, unless the child is in such distress that it is not possible to do so. If staff are concerned in any way parents will be sent for and asked to assist their child and informed if the child becomes distressed.

CLEANING

Suspecting a child has soiled him/herself

If a member of staff suspects that one of the children in a class has soiled themselves, (often they are alerted to the fact by the smell), then they should discreetly try to find out who it is. This is done initially by approaching children individually and asking quietly if they need to go to the toilet. Close proximity to the child who has soiled themselves will often identify which child it is.

If the adult is still unsure about which child has soiled themselves then they may consider taking individuals away from the classroom to walk down the corridor on some pretext to see if the smell follows them, thereby identifying the child.

If this process doesn't result in identifying the child then Mrs Barnard or Mrs Sutherland/Mrs Devaney will need to be informed so that a decision on how to proceed can be taken.

In any of the above circumstances, once the child has been identified the intimate care plan should be followed.

Changing a child who has soiled him/herself

In the event of a 'one-off' incident, such as a toileting accident, it is important to do everything possible to respect a child's dignity and right to privacy. Therefore, a child should be encouraged to clean themselves as far as possible and dress themselves if this is manageable. If a member of staff needs to assist a child with cleaning and/or dressing, it is best practice to let the child know what you intend to do. **At all times there should be two members of staff present** unless there is a care plan in place that says otherwise. If the child shows any signs of resistance or reluctance, **DO NOT** pursue the matter any further. Make sure the child is safe then ask another adult to make contact with parents requesting them to attend the school immediately to tend to their child. If the child does allow you to attend to

their need, the amount of physical contact should be minimal and just enough to ensure the child is clean.

- Ensure the child is happy with who is changing him / her.
- Be responsive to any distress shown.
- Always wear protective disposable gloves.
- Seal any soiled clothing in a plastic bag for return to parents.

Washing facilities are available in the disabled toilet near the Head's office and spare clothing is kept in the medical room.

PHYSICAL CONTACT

Providing comfort or support to a child

There are situations and circumstances where children seek physical comfort from staff (particularly children in Early Years). Where this happens staff need to be aware that any physical contact must be kept to a minimum. When comforting a child or giving reassurance, staff must ensure that at no time can the act be considered intimate. If physical contact is deemed to be appropriate, staff must provide care which is professionally appropriate to the age and context.

If a child touches a member of staff in a way that makes him/her feel uncomfortable this can be gently but firmly discouraged in a way which communicates that the touch, rather than the child, is unacceptable. If a child touches a member of staff, as noted above, this should be discussed, in confidence with the Child Protection Leader, Mrs Debbie Barnard.

MEDICAL

Assisting a child who requires a specific medical procedure and who is not able to carry this out unaided.

Our Administration of Medications Policy outlines arrangements for the management of the majority of medications in school.

Parental permission must be given before any medication is dispensed in school- please direct the parent/carer to Mrs Barnard .

A small number of children will have significant medical needs and in addition to the arrangements included in our Administration of Medications Policy will have an Individual Health Care Plan. If required, school staff will receive appropriate training.

SWIMMING

Some of our children participate in a swimming programme at a local pool. Children are entitled to respect and privacy when changing their clothes however, there must be the required level of supervision to safeguard young people with regard to health and safety considerations and to ensure that bullying, teasing or other unacceptable behaviour does not occur.

Our school staff will ensure that there is effective and discrete supervision and privacy for our children when changing. At no time will a male member of staff be present in a female changing room.

Where a child needs additional support for changing parental permission will be sought and a personal care plan will be drawn up so as to maintain dignity but increase independence.

RESIDENTIAL VISITS

Residential educational visits are an important part of our school experience. Particular care is required when supervising pupils in this less formal setting.

Staff are still guided by our Child Protection procedures, Pastoral Care and Positive Behaviour Policies. Some specific intimate care issues may arise in a residential context.

Showering

Children are entitled to respect and privacy when changing their clothes or taking a shower. However, there must be the required level of supervision to safeguard young people with regard to health and safety considerations, and to ensure that bullying, teasing or other unacceptable behaviour does not occur. This means that staff should announce their intention of entering changing rooms, avoid remaining in changing rooms unless pupil needs require it, avoid any physical contact when children are in a state of undress and avoid any visually intrusive behaviour.

Given the vulnerabilities of the situation, it is strongly recommended that when supervising children in a state of undress, another member of staff is present. However, this may not always be possible and therefore staff need to be vigilant about their own conduct, e.g. adults must not change in the same place as children or shower with children.

Night Time Routines

It is established practice that the children's bedrooms are private spaces and anyone else wanting to enter the room should knock and announce their intention to enter.

At bedtime, children are given a set amount of time to change and prepare for bed and will be told when the supervising teachers will visit the rooms to check all is okay and switch off the lights. A reciprocal arrangement is in place in the mornings.

There are occasions when incidents take place during the night and the need arises to:

1. Assist a child to **change his / her clothes**
2. **Change a child** who has soiled him / herself

3. **Provide comfort** to an upset or distressed child
4. Assist a child who requires a specific **medical procedure** and who is not able to carry this out unaided. Guidance as above will be followed with the support of an additional member of staff in attendance.

SCHOOL RESPONSIBILITIES

Only those members of staff who are familiar with the intimate care policy are involved in the intimate care of children.

Where anticipated, intimate care arrangements are agreed between the school and parents and, when appropriate and possible, by the child. Consent forms are signed by the parent and stored in the child's file. **Only in emergency would staff undertake any aspect of intimate care that has not been agreed by parents and school.** Parents would then be contacted immediately.

The views of all relevant parties should be sought and considered to inform future arrangements.

If a staff member has concerns about a colleague's intimate care practice he or she must report this to the Child Protection Leader or Head/Deputy.

GUIDELINES FOR GOOD PRACTICE

All children have the right to be safe and to be treated with dignity and respect. These guidelines are designed to safeguard children and staff. They apply to every member of staff involved with the intimate care of children.

Young children and children with special educational needs can be especially vulnerable. Staff involved with their intimate care need to be particularly sensitive to their individual needs.

Members of staff also need to be aware that some adults may use intimate care, as an opportunity to abuse children. It is important to bear in mind that some forms of assistance can be open to misinterpretation. Adhering to the following guidelines of good practice should safeguard both children and staff.

1. **Involve the child in the intimate care.** Try to encourage a child's independence as far as possible in his or her intimate care. Where a situation renders a child fully dependent, talk about what is going to be done and, where possible, give choices. Check your practice by asking the child or parent about any preferences while carrying out the intimate care.
2. **Treat every child with dignity and respect and ensure privacy appropriate to the child's age and situation.** Care must not be carried out by a member of staff working alone with a child.

3. **Make sure practice in intimate care is consistent.** As a child may have multiple carers a consistent approach to care is essential. Effective communication between all parties ensures that practice is consistent.
4. **Be aware of your own limitations.** Only carry out activities you understand and feel competent with. If in doubt, ask. Some procedures must only be carried out by members of staff who have been formally trained and assessed.
5. **Promote positive self-esteem and body image.** Confident, self-assured children who feel their bodies belong to them are less vulnerable to sexual abuse. The approach you take to intimate care can convey lots of messages to a child about their body worth. Your attitude to a child's intimate care is important. Keeping in mind the child's age, routine care can be both efficient and relaxed.
6. **If you have any concerns you must report them.** If you observe any unusual markings, discolouration or swelling report it immediately to the Child Protection Leader or Head/Deputy.

If a child is accidentally hurt during intimate care or misunderstands or misinterprets something, reassure the child, ensure their safety and report the incident immediately to the Child Protection Leader or Head/Deputy. Report and record any unusual emotional or behavioural response by the child. A written record of concerns must be made available to parents and kept in the child's personal file.

CROSS GENDER CARE

There is positive value in both male and female staff being involved in intimate/personal care tasks, although it may be unacceptable to some parents and carers, or indeed the child, to have the opposite sex attending to their toileting or other intimate care needs, and this should be respected. However, at times there may be exceptional circumstances whereby human resource implications prevent full consideration of these wishes.

COMMUNICATION WITH CHILDREN

It is the responsibility of all staff caring for a child to ensure that they are aware of the child's method and level of communication. Depending on their maturity and levels of stress children may communicate using different methods - words, signs, symbols, body movements, eye pointing, etc. To ensure effective communication:

- Make eye contact at the child's level;
- Use simple language and repeat if necessary;
- Wait for response;
- Continue to explain to the child what is happening even if there is no response; and
- Treat the child as an individual with dignity and respect.