

# **Blackshaw Moor CofE (VC) First School Intimate Care Policy**

## **Introduction**

Intimate care is any care which involves washing, touching or carrying out an invasive procedure (such as cleaning up a pupil after they have soiled themselves) to intimate personal areas. In most cases such care will involve cleaning for hygiene purposes as part of a staff member's duty of care. In the case of a specific procedure only a person suitably trained and assessed as competent should undertake the procedure, (e.g. the administration of rectal diazepam.) Staff training will be provided where it is deemed necessary/appropriate eg. Prick test for diabetics.

The issue of intimate care is a sensitive one and requires that all staff are respectful of the child's needs. The child's dignity should always be preserved with a high level of privacy, choice and control. All staff should have a high awareness of child protection issues. Staff behaviour must be open to scrutiny and staff must work in partnership with parents/carers to provide continuity of care to children/young people wherever possible.

Blackshaw Moor First 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 children with respect when intimate care is given. No child should be attended to in a way that causes distress or pain.

## **Our approach to best practice**

The management of all children with intimate care needs is carefully planned. The child who requires intimate care is treated with respect at all times; the child's welfare and dignity is of paramount importance. The school will work closely with parents with regards to meeting the child's needs sensitively and with respect. Intimate care needs are discussed with parents before the child starts school. Staff who provide intimate care are aware of best practice. Apparatus will be provided to assist with children who need special arrangements following assessment from physiotherapist/ occupational therapist as required.

Staff adapt their practice in relation to the needs of individual children taking into account developmental changes such as the onset of puberty and menstruation. The child 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 him/herself as he/she can. This may mean, for example, giving the child responsibility for washing themselves. Individual intimate care plans will be drawn up with staff and parents for particular children as appropriate to suit the circumstances of the child.

2 members of staff will always be present when a child is toileted, each child's right to privacy will be respected

Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the child's care plan where applicable. The needs and wishes of children and parents will be taken into account wherever possible within the constraints of staffing and equal opportunities legislation.

### **The Protection of Children**

#### **Ref; Child protection Policy**

Education Child Protection Procedures and Inter-Agency Child Protection procedures will be adhered to.

All children 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 child's presentation, e.g. marks, bruises, soreness etc. they must immediately report concerns to the DSP (Mrs Jill Tillmanns ) or deputy designated person for child protection (Mrs Julie Picken)

If a child becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be looked into and outcomes recorded.

Parents/carers will be contacted at the earliest opportunity as part of this process in order to reach a resolution. Staffing schedules may be altered until the issues are resolved so that the child's needs remain paramount. Further advice will be taken from outside agencies if necessary.

If a child makes an allegation against a member of staff, all necessary procedures will be followed.

### **Guidance re aspects of intimate care .**

#### **Introduction**

The following advice/strategies are some suggestions as possible ways to actively promote inclusion and the welfare of pupils.

#### **Children wearing nappies**

All children are admitted to school, regardless of whether they are still wearing nappies. Where a child is using nappies there will be a signed agreement with the parents outlining who will usually be responsible for changing the child and when and where this will be carried out. This agreement allows us and the parents to be aware of all the issues surrounding this task right from the outset. A record will be kept of when changing took place and who carried it out. If the child refuses to have the nappy changed the parent must be informed. Nappies and wipes from healthy children can be double bagged or put into nappy sacks and placed into the waste disposal bins.

### Changing facilities

At all times the dignity and privacy of the child will be of paramount concern.

Consideration must be taken into account for health and safety issues

The area must not be situated in a thoroughfare

A changing mat will be used on the floor when a child is to be changed. This is the recommended method of changing a child, as it avoids an adult having to lift a child and cause possible back injury.

It may be appropriate to clean children up in the 'Area' toilets

Sensitivity to where a children is changed/cleaned and safety of the member of staff must be considered.

### Equipment Provision

Parents are expected to provide nappies if their child is still wearing them. The parent should provide nappies, disposal bags, wipes, changing mat etc. and parents should be made aware of this responsibility. Schools are responsible for providing medical gloves, plastic aprons, a bin and liners to dispose of any waste.

### Special needs

Children with special needs have the same rights to safety and privacy when receiving intimate care. Additional vulnerabilities that may arise from a physical disability or learning difficulty must be considered with regard to individual teaching and care plans for each child. As with all arrangements for intimate care needs, agreements between the child, those with parental responsibility and the organisation should be easily understood and recorded. Regardless of age and ability, the views and/or emotional responses of children with special needs should be actively sought (with advocacy arrangements made for those who can't) in regular reviews of these arrangements.

**Guidance to safeguard children and education staff with regard to situations which may lend themselves to allegations of abuse (Physical contact, first aid, showers/ changing clothes, out of school activities etc)**

### Physical Contact

All staff engaged in the care and education of children and young people need to exercise caution in the use of physical contact.

Staff at Blackshaw Moor First School work in a 'limited touch' culture so that when physical contact is made with pupils this will be in response to the pupil's needs at the time, will be of limited duration and will be appropriate given their age, stage of development and background. This limited touch will also be very visible through careful choice of location and body position. **Hands must always be visible.**

Staff should be aware that even well intentioned physical contact might be misconstrued directly by the child, an observer or by anyone the action is

described to. Staff must therefore always be prepared to justify actions and accept that all physical contact be open to scrutiny.

Physical contact which is repeated with an individual child or young person is likely to raise questions unless the justification for this is formally agreed by the child, the organisation and those with parental responsibility.

Children with special needs may require more physical contact to assist their everyday learning. The general culture of 'limited touch' will be adapted where appropriate to the individual requirements of each child. All arrangements must be understood and agreed by all concerned, justified in terms of the child's needs, consistently applied and open to scrutiny. Wherever possible, consultation with colleagues should take place where any deviation from the arrangements is anticipated. Any deviation and the justification for it should be documented and reported.

Extra caution may be required where a child has suffered previous abuse or neglect. In the child's view, physical contact might be associated with such experiences and lead to staff vulnerable to allegations of abuse. Additionally, many such children are extremely needy and seek out inappropriate physical contact. In such circumstances staff should deter the child without causing them a negative experience. Ensuring that a witness is present will help to protect staff from such allegations.

#### Highly recommended Tips

1. Hands always very visible
2. Talk the child through what you are doing eg. I am going to put my hands under you legs so I can lift you. (Particularly in swimming lessons)
3. Always check that what you are going to do is acceptable to the child and they know why you are doing it.
4. Keep children to your side at all times
5. Deter children from sitting on your lap. Where essential, keep child's legs to the side
6. Tell someone where you are going and why
7. Keep doors open and talk to people outside
8. Make sure someone knows you are in a room alone with a child or call another adult to be with you.

Swimming lessons present problems for child protection - please follow guidance above and see Swimming Policy.

#### **Restraint**

##### **(ref restraint Policy)**

There may be very rare occasions where it is necessary for staff to restrain children physically to prevent them from inflicting damage on either themselves,

others or property. Restraint should be used only as a last resort to ensure the safety of the child. All other options should be explored first.

In such cases only the minimum force necessary should be used for the minimum length of time required for the child to regain self- control.

In all cases of restraint the incident must be documented and reported in the serious incidents book. Under no circumstances is it ever permissible to use physical force as a form of punishment, to modify behaviour, or to make a pupil comply with an instruction. Physical force of this nature can, and is likely to, constitute a criminal offence. This is not accepted or tolerated in our school.

### **Pupils in distress**

There may be occasions when a distressed pupil needs comfort and reassurance that may include physical touch such as a caring parent would give. Staff must remain self-aware at all times to ensure that their contact is not threatening or intrusive and not subject to misinterpretation.

Judgements will need to take account of the circumstances of a pupil's distress, their age, the extent and cause of the distress. Unless the child needs an immediate response, staff should consider whether they are the most appropriate person to respond.

Particular care must be taken in instances which involve the same pupil over a period of time.

Where a member of staff has a particular concern about the need to provide this type of care and reassurance they should seek further advice, from the class teacher or head teacher.

### **First Aid and intimate care**

Staff who administer first aid should ensure wherever possible that another adult or other children are present. The pupil's dignity must always be considered and where contact of a more intimate nature is required (e.g. assisting with toileting or the removal of wet/soiled clothing), another member of staff should be in the vicinity and should be made aware of the task being undertaken.

Regular requirements of an intimate nature should be planned for. Agreements between the school, those with parental responsibility and the child concerned should be documented and easily understood. The necessity for such requirements should be reviewed regularly. The child's views must also be actively sought and, in particular, any discomfort with the arrangements addressed.

Where a child wets or soils themselves and there is no written agreement the school will inform the parents of the actions taken, the child's comfort must be paramount. The school will provide clean underwear/clothes and send home the soiled/wet clothing. The above guidelines for changing a child must be followed.

### **Physical Education/Swimming and other skills coaching**

Staff are likely to come into physical contact with pupils from time to time in the course of their duties when participating in games, demonstrating an exercise or the use of equipment.

Staff should be aware of the limits within which such contact should properly take place and of the possibility of misinterpretation.

Where it is anticipated that a pupil might be prone to misinterpret any such contact, alternatives should be considered, perhaps involving another member of staff or a less vulnerable pupil in the demonstration.

Currently all children change together in the classroom. At the swimming pool boys/girls change in separate changing rooms. The adults supervise and keep an overall check on the children as they change.

Should staff see any marks, bruising or scars during changing, the guidelines in the child protection policy should be followed.

### **Changing clothes**

Young people are entitled to respect and privacy when changing 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 or teasing does not occur. This means that adults should announce their intention of entering toilet/changing areas, avoid remaining in toilet areas unless there is an emergency or care plan in place. Any physical contact or visually intrusive behaviour should be avoided when children are in a state of undress.

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, eg adults must not change in the same place as children.

### **Out of school trips, clubs etc.**

#### **(Ref school visits procedures)**

Employees should take particular care when supervising pupils in the less formal atmosphere of a school trip or after-school activity. Although more informal relationships in such circumstances tend to be usual, the standard of behaviour expected of staff will be no different from the behaviour expected within school. Staff involved in such activities should also be familiar with their school's/establishment's policy and all LEA Guidance regarding out of school activities.

To ensure pupils' safety, increased vigilance may be required when monitoring their behaviour on school trips. It is important to exercise caution so that a pupil is not compromised and the member of staff does not attract allegations of overly intrusive or abusive behaviour. Meetings with pupils away from the school premises where a chaperone will not be present, are not permitted unless specific approval is obtained from the head teacher or other senior colleague with delegated authority.

Staff should not place themselves in a position where they are in a vehicle, house or other venue alone with a child.

If staff come into contact with pupils whilst off duty, they must behave as though in their professional role and not give conflicting messages regarding their own conduct.