



ST BERNADETTE'S
CATHOLIC PRIMARY SCHOOL

Intimate Care Policy

St. Bernadette's Catholic Primary School

Approved by BoD: 30/09/2024
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Mission Statement

At St Bernadette's, we follow Jesus by sharing His light through our words and actions, spreading His word in how we live and learn, trusting His plan even when the path is uncertain, loving one another with compassion and respect, and serving others with humility, just as Christ did. Through these daily acts of faith and kindness, we grow together as a community of disciples.

Introduction

The Intimate Care Policy and Guidelines for staff who work with children has been developed to safeguard children and staff. They apply to everyone involved in the intimate care of children. This guidance is based on good practice and practical experience of those working with children and young people requiring intimate care.

Definition of Intimate Care

Intimate care is any care which involves washing, touching or carrying out an invasive procedure that some children are unable to do due to physical disability, special educational needs associated with learning difficulties, medical needs or needs arising from the child's stage of development. Intimate care may involve help with drinking, eating, dressing and toileting.

In most cases Intimate Care will involve procedures to do with personal hygiene and the cleaning of equipment associated with the process and should only be carried out by suitably trained, competent staff.

Aims and Objectives

The aims of this document and associated guidance are:

- to safeguard the dignity, rights and well being of children and staff
- to provide guidance and reassurance to staff
- to assure parents that staff are knowledgeable about Intimate Care and that their child's individual needs and any concerns they may have are taken into account.

Principles

This document supports the principles that every child has the right to:

- feel safe and secure
- be treated as an individual
- privacy, dignity and a professional approach from all staff when meeting his or her needs
- have their health needs met, information and support that will enable him or her to make informed and appropriate choices
- be accepted for who they are, without regard to age, gender, ability, race, culture or beliefs
- information and procedures for any complaint or queries he or she may have regarding intimate care

Working with Parents/Carers

Partnership with parents/carers is an important principle in any setting and is particularly necessary in relation to children needing intimate care. Much of the information required to make the process of intimate care as comfortable as possible is available from parents/carers, including knowledge and understanding of any religious/cultural sensitivities.

Prior written permission must be obtained from parents/carers before and where there are on-going intimate care procedures being carried out.

Parents should be encouraged and empowered to work with staff to ensure their child's needs are identified, understood and met. This will include involvement in the development of Intimate Care Plans, Assess, Plan, Do, Reviews (APDRs) Health Care Plans and any other plans that might involve intimate care.

Exchanging information with parents/carers is essential through personal contact, telephone calls or correspondence. However, it may not be appropriate to record information concerning intimate care procedures in Home/School Link Books as it may contain confidential information that could be accessed by people other than the parent/carer and staff member.

Intimate Care Plans

Where a routine procedure is required an Intimate Care Plan should be agreed in discussion with the child, school staff, parents/carers and any relevant health personnel. The Plan should be signed by all who contribute and reviewed on a regular basis.

In developing the Plan the following should be considered:

Implications for our School:

- importance of the child working towards independence
- arrangements for sports day, school performances, school trips, swimming, etc.
- who will substitute in the absence of the appointed person providing the intimate care
- strategies for dealing with pressure from peers, e.g. teasing/bullying

Considerations of the management of the learning environment:

- child's seating arrangements in class
- system for the child to leave class with minimal disruption to the lesson
- avoidance of missing the same lesson all year
- awareness of a child's discomfort which may affect learning
- implications for PE e.g. discreet clothing, additional time for changing

All plans must be clearly recorded to ensure clarity of expectation, roles and responsibilities. All methods of communication including emergency procedures between home, school and the medical service should be included. A procedure should also be included to explain how concerns arising from the intimate care process will be dealt with.

If the Intimate Care Plan has been agreed and signed by parents, children and staff involved, it is acceptable for only one member of staff to assist unless there is an implication for safe moving and handling of the child.

The plan should consider the following:

- location of the plan for reference, ensuring discretion and confidentiality
- location of recording procedures, ensuring discretion and confidentiality
- necessary equipment & waste disposal - see environmental advice
- clear labelling of equipment and procedures e.g. wipe table after use
- clear time lines for review
- on-going review of the child's developing needs with parents
- appropriate terminology to be used by staff for private parts and bodily functions

Links with other Agencies

Positive links with other agencies will ensure the child's well being and development remains paramount. This will enable school/setting based plans to take account of the knowledge, skills and expertise of other professionals

It is good practice that relevant health and other agency professionals are informed of all children requiring intimate care e.g. School Health.

Pupil Voice

- To ensure effective communication with the child, staff should ascertain the agreed method of communication and identify this in the agreed Intimate Care Plan.
- Allow the child, subject to their age and understanding, to express a preference regarding the choice of his/her carer and sequence of care.
- Agree appropriate terminology to be used by staff for private parts and bodily functions and record them in the Care Plan.
- It is the responsibility of all staff caring for a child to ensure they are aware of the child's method and level of communication. Communication methods may include words, signs, symbols, body movements and eye pointing.
- Every attempt should be made to determine the child's wishes (e.g. by observation of their reactions to the intimate care).
- Where there is any doubt that a child is able to make an informed choice on these issues, the child's parents are usually in the best position to act as advocates.

Recruitment

Parents must feel confident that relevant staff have been carefully vetted and trained helping to avoid potentially stressful areas of anxiety and conflict.

Recruitment and selection of candidates for posts involving intimate care should be made following the usual Criminal Records Bureau checks, equal opportunities and employment rights legislation.

Candidates should be made fully aware of what the post requires, including the developmental needs of the child and what is detailed in their job description before accepting the post.

Enquiries should be made into any restrictions the candidates may have which will impede their ability to carry out the tasks involved. This will enable employers to identify and provide necessary support and reasonable adjustments, so far as is reasonably practicable.

Wherever possible, staff should work with children of the same sex in providing intimate care respecting their personal dignity at all times.

Trained staff should be available to substitute and undertake specific intimate care tasks in the absence of the appointed person.

Intimate care can only be provided in our School by those who have specifically indicated a willingness to do so, either as part of their agreed job description or other arrangements. Those employees agreeing to undertake Intimate Care will receive appropriate training to undertake these tasks.

Staff Development

- Staff should receive training in good working practices, appropriate to their role, which comply with Walsall's Children's Services Health & Safety Policy requirements.
- Staff must receive Safeguarding and Child Protection training in line with Walsall Children's Services requirements.
- Staff must be trained in the specific types of intimate care that they carry out and fully understand the Intimate Care Policy and Guidelines within the context of their work.
- Where appropriate, staff must receive Moving and Handling training annually and if and when required.
- All staff should have an understanding of our school's approach to intimate care through continuing professional development.
- It is imperative for our school and individual staff to keep a dated record of all training undertaken.
- The following guidelines should be used in training senior staff and those identified to support intimate care.

Senior Staff members should be able to:

- Ensure that sensitive information about a child is only shared with those who need to know, such as parents and members of staff specifically involved with the child. Other personnel should only be given information that keeps the child safe.
- Consult parents about arrangements for intimate care.
- Ensure staff are aware of the set procedures, the Child Protection Policy and Health & Safety Policy etc.
- Ensure staff understand the cultural needs of all children and seek specialist advice when necessary.
- Ensure staff know who to ask for advice if they are unsure or uncomfortable about a particular situation.
- Wherever possible, avoid using staff involved in intimate care, in the delivery of sex education, as an additional safeguard to both staff and children involved.

In addition, identified staff members should be able to:

- Access other procedures and policies regarding the welfare of the child e.g. Child Protection
- Identify and use a communication system that the child is most comfortable with.
- Communicate with and involve the child in the intimate care process
- Offer informed choices, wherever possible
- Develop, where possible, greater independence with the procedure of intimate care
- Maintain confidentiality with children who discuss elements of their intimate care unless it is a child protection issue when Child Protection Procedures must be followed.

Environmental Advice

When children need intimate care, reasonable adjustments will need to be made.

Where children have long-term incontinence or a disability requiring regular intimate care, specially adapted facilities will be required by our school. Specialist advice from medical or therapy staff may be required when considering the needs of individual children.

School - additional considerations will include the provision of changing facilities with available running water, the provision of disposable gloves and aprons, the provision of foot operated labelled bins for the disposal of wet/soiled nappies/pads, the provision of a suitable changing mat/table/surface, sterilising spray/fluid/wipes, disposing facilities.

Parents/carers - should provide suitable nappies/pads, wipes.

An effective system should be in place to alert staff for help in an emergency.

Invasive Procedures

Parents should sign the Parental Agreement to agree to the presence of one adult only unless other circumstances dictate that two will be required. Note: Whilst having two adults present may be seen as providing protection against a possible allegation against a member of staff, it further erodes the privacy of the child.

Schools should make arrangements to ensure that there is a member of staff nearby when intimate care takes place.

Vulnerability to Abuse

It is essential that all staff are familiar with the School's Child Protection Policy and Procedures.

The following are factors that can increase a child's vulnerability:

- children who need help with intimate care are statistically more vulnerable to exploitation and abuse
- children with disabilities may have less control over their lives than others
- children do not always receive sex and relationship education and may therefore be less able to recognise abuse.

- children may experience multiple carers
- children may not be able to distinguish between intimate care and abuse
- children may not be able to communicate

If a child appears to misunderstand or misinterpret an action/instruction, the incident should be reported immediately to the Head Teacher and parent/carer at the end of the day (or sooner if felt to be more appropriate).

Allegations of Abuse

Personnel working in intimate situations with children can feel particularly vulnerable. This Policy can help to reassure both staff involved and the parents of vulnerable children.

Action should be taken immediately should there be a discrepancy of reports between a child and the personal assistant, particularly with reference to time spent alone together.

The support role will be changed as quickly as possible, should such a discrepancy occur, and then reviewed on a regular basis.

Where there is an allegation of abuse, the guidelines in the Walsall's Safeguarding Children's Board procedures should be followed.