

# Lever Edge Primary Academy



## Intimate Care/ Close Personal Contact

Reviewed Autumn Term 2022



## Introduction

Intimate care is any care which is associated with invasive procedures relating to bodily functions, bodily products and personal hygiene which demands direct or indirect contact with or exposure of intimate parts of the body, such as cleaning up after a child who has soiled themselves. In addition, some children may need help with dressing/undressing or using the toilet. Most children can carry out these functions themselves but it is recognised that some are unable to due to physical disability, learning difficulties, medical needs or needs arising from the child's stage of development.

This Intimate Care Policy has been developed to safeguard children, support staff and ensure good practice is followed. At Lever Edge Primary Academy, all staff are checked with the Disclosure and Barring Service (DBS) and we are committed to ensuring that all staff responsible for the intimate care of children will undertake their duties in a professional and caring manner at all times. We believe that the intimate care of children cannot be separated from other aspects of their learning and development and we believe that every child has the right to feel safe and secure. We do not discriminate against children who have not reached a stage where they can manage their own personal hygiene and as such, welcome all children to participate in our school and provide appropriate support for each child on an individual basis. We recognise the need to treat all children with respect and dignity when intimate care is given. No child should be attended to in a way that causes distress, embarrassment or pain.

We aim to:

- Safeguard the rights and promote the welfare of all children and young people including those who may be more vulnerable to abuse
- Provide guidance and reassurance to staff whose duties may include intimate care
- Assure parents and carers that staff are knowledgeable about personal care and that their child's individual needs and concerns are taken into consideration
- Remove barriers to learning and participation, protect from discrimination and ensure inclusion for all children and young people within our setting

## Our Approach to Best Practice

Individual intimate care plans will be drawn up for particular children, as appropriate, to suit the circumstances of the child. We will work with parents of a child, who requires intimate care, to establish a preferred procedure for supporting the child. Where these procedures may require specialist training, we will seek out training for the staff who will be involved in a child's care, ensuring that the child's key-person and at least one other member of staff accesses the training. Staff members who are known to the child will take on that responsibility for changing children. The staff member who is involved, will always ask the child for permission to assist them. The child will be supported to achieve the highest level of autonomy and independence possible given their age and ability. Careful consideration will be given to each child's situation in determining how many carers might need to be present when a child is toileted.

Where possible, one child will be cared for by one adult unless there is a sound reason for having more adults present. It is the parent's responsibility to provide nappies, disposal bags and wipes.

## **Working with Parents**

We believe that our partnership with parents is an essential principle in our setting and is particularly necessary in relation to children needing intimate care. We recognise that the information required to carry out intimate care is gained from parents, as is prior permission (see Appendix 1). We acknowledge that cultural influences may affect what is deemed 'intimate' and ensure we pay regard to social, ethnic and cultural perspectives through open dialogue with parents.

Parents should be encouraged and empowered to work with staff to ensure that their child's needs are identified, understood and met.

When any intimate care is carried out on children, with individual care plans, it will be recorded on their own personal record (see appendix 2). All information concerning intimate care procedures is recorded and stored securely.

We appreciate that sometimes children have toileting 'accidents' which are out of character for them. In the event of this, and in the absence of a personal intimate care plan, the child would be fully encouraged and supported to achieve the highest level of autonomy that is possible given their age and ability. Staff will encourage the child to do as much for his/herself as possible and parents will be informed the same day. On the rare occasion that a child is soiled to a point where they are unable to clean themselves to a comfortable state, parents would be contacted immediately so that the child could be taken home for bathing.

## **Showers/Changing Clothes**

Children are entitled to respect and privacy when changing clothes or taking a shower. However, there must be the required level of supervision to safeguard children with regards to health and safety considerations. Adults should announce their intention of entering the changing room, avoid remaining in the changing room 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. must not change in the same place as children or shower with children.

## **Oral Hygiene**

Staff may assist children to clean teeth, if so requested.

## **Nursery - Nappy Changing, Soiling and Toileting Policy**

We work with parents/carers towards toilet training, unless there is a medical or development reason why this may not be appropriate at the time. No child is excluded from nursery for not yet being toilet trained or for still wearing nappies or equivalent.

Nursery does not provide nappies, creams or wipes.

Parents are asked beforehand to provide enough nappies, creams and wipes for each session that their child attends.

The children's nappies will be kept with the child's name on. In the Three Year Old Nursery, the child's items are kept in their named bag on their peg.

Nappies are checked at 2-hour intervals and changed throughout the session as required.

We see toilet training as a self-care skill that children will have the opportunity to learn, with the full support and non-judgemental concern of adults.

All children are free to go to the toilet during the session, with help or supervision, if required. A non-slip step will be available in the toilet area.

Staff will work with parents towards toilet training when their child is ready.

In order to ensure a high standard of care and safety, the following guidelines must be followed: -

#### **Guidelines for Changing Children**

- If possible children should be changed standing up or using the variable height changing table (disabled toilet) to avoid staff lifting children. In the Three Year Old Nursery, if the child is in a full nappy, the child will be changed on a change mat within the appropriate children's toilet
- The child's skin should be cleaned with a disposable wipe
- Nappy creams/lotions should be labelled with the child's name and used only if prescribed for that child (by their parents). They must not be shared
- Disposable gloves, apron and mask should be worn when changing nappies. The nappy should be folded inward to cover faecal material and double wrapped in a nappy bag. Soiled nappies should be disposed of into the bin provided. The disposal bin should be lined and emptied daily, replacing the used bin liner
- Any soiled or damp clothing should be placed in a yellow plastic carrier bag located in the disabled toilet, and sent home with the child
- Once the child has been changed and removed from the changing area, the surface should be cleaned with an antibacterial detergent spray or wipe and left to dry
- Gloves, apron and any items used for cleaning the changing area will be wrapped and disposed of via domestic waste
- Hands should be thoroughly washed afterwards
- The intimate care record should be completed

## **The Protection of Children**

Child Protection procedures will be adhered to. All children will be taught personal safety skills carefully matched to their level of development and understanding to build their confidence and assertiveness about their own body and its worth. Confident and assertive children who feel their body belongs to them, are less vulnerable to abuse.

If a member of staff has a concern about physical changes in a child's presentation, e.g. marks, bruises, soreness etc. s/he will follow the school's safeguarding procedures.

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.

If a child makes an allegation against a member of staff, all necessary procedures will be followed. (See Safeguarding and Child Protection Policy and Procedures)

## **Allegations of Abuse**

Personnel working in intimate situations with children can feel particularly vulnerable. This school policy can help to reassure both staff involved and the parents of vulnerable children. Action will be taken immediately should there be a discrepancy of reports between a child and the personal assistant. Where there is an allegation of abuse, the guidelines in the Child Protection procedures will be followed.

## **Policies**

These guidelines should be read in conjunction with the following policies:

- Health and Safety Policy
- Child Protection and Safeguarding Policy
- Supporting Children with Medical Needs Policy
- Complaints Policy

The Board of Trustees reviews this policy every two years. The Trustees may, however, review the policy earlier than this, if the government introduces new regulations, or if the Trustees receive recommendations on how the policy might be improved.

## **Appendix 1**

(Letter to parent(s) outlining policy/procedures and their consent to carry out 'intimate care')

Dear Parents,

I am writing to you regarding occasions when your child may need support with intimate care routines. We have drawn up the attached guidelines to ensure that at all times, your child's needs are met in a professional and dignified manner. I would be grateful if, once you have read the guidelines, you sign and return the slip below agreeing to the school carrying out 'intimate care' procedures, where necessary.

Yours sincerely,

Mrs K James  
Headteacher

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I have read a copy of the School's 'Intimate Care Policy.'

I agree to the school carrying out 'intimate care' on my son/daughter when necessary.

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

Print Name: \_\_\_\_\_

Name of Child: \_\_\_\_\_ Child's Class: \_\_\_\_\_

Date: \_\_\_\_\_

## **Appendix 2**

### TOILET TRAINING/CHANGING RECORD

(To be completed after each 'intimate care' activity)

Name of Child: .....

Class: .....

<b>Date</b>	<b>Time</b>	<b>Adult</b>	<b>Comments e.g. what action was taken</b>

**Appendix 3**

**CLEAN INTERMITTENT CATHETERISATION/CHANGING RECORD**

(To be completed after each 'intimate care' activity)

Name of Child: ..... Class: .....

Date	Time	Adult	Was catheterisation successful	Amount of urine removed (measured in in cups)	Were there any issues (if so what were they)	Was the urine clear and blood free (specify)