

Working together, learning together

Date approved: March 2021 Next review Date: Spring 2024 Reviewers: SLT

OVERVIEW

- 1. Intimate care can be:
 - a. changing a child, or helping to change or clean a child, because of a toileting accident or sickness;
 - b. supporting an individual child, who has specific medical needs;
 - c. attending to the needs of a child with additional or special educational needs, who may need help with all aspects of personal care including washing, dressing and toileting
- 2. Navigation Primary School (the School) is committed to ensuring that all staff responsible for the intimate care of children
- 3. will undertake their duties in a professional manner at all times.

- 4. Unless children have special needs, we will normally expect that parent/carers prepare their children for school by showing them how to dress and undress independently and manage their own personal hygiene. Every effort should be made to encourage independence before a child arrives at school.
- 5. Where children have the need for help with personal intimate care we will ensure that the management of those needs will be carefully planned and that any child who requires such care is treated with respect and the child's safety, welfare and dignity will be of paramount importance at all times.
- 6. Only members of the School staff will provide intimate care.

OBJECTIVES

- 1. To ensure that children are treated with respect when intimate care is given.
- 2. To ensure that the intimate care of children must never cause worry, distress humiliation or pain and that everything will be done to avoid embarrassment.
- 3. Each child's needs will be considered individually.
- 4. To ensure that the provision of intimate personal care meets fully the requirements of the School's Safeguarding Policy.
- 5. To provide for the needs of children who are incontinent, in line with the Special Educational Needs and Disability Act 2014, as far as is reasonably practicable.
- 6. To ensure that parents are appropriately involved and where urgent or emergency care is given parents/carers will be contacted at the earliest opportunity.

KEY STRATEGIES

- 1. Where the need for personal intimate care is known in advance the members of staff who provide it will be properly trained to do so and are fully aware of best practice and staff, in conjunction with parents/carers, the school nursing service/health visitor or other relevant professional agencies, will draw up a continence care plan. The child will also be consulted, if appropriate, as well as the staff involved in carrying out the care. The plan will include information about when and where the child will be cared for and which members of staff will support and manage the plan.
- 2. Early years staff will give particular attention to planning for the development of independence skills, particularly for children who are highly dependent upon adult support for personal care.

- 3. Children will not be excluded from everyday educational activities solely because of a manageable condition.
- 4. In an emergency any member of staff may be asked to provide personal intimate care and they will be guided by this policy, the Safeguarding Policy other relevant policy. More than one person should be present to safeguard the interests of both the child and carer unless the circumstances require immediate and urgent action and a second person is unavailable.
- 5. All nursery children will have a bag with spare clothes in and school has a stock of spare clothes for emergency use. Where a child has a care plan, parents will be expected to provide the school with a reserve of clothing. In an emergency, or if an older child has an unexpected accident, the School will provide appropriate temporary clothing which parents will be expected to wash, iron and return if none are available parents/carers will be contacted to bring a change of clothing to school.
- 6. Good practice in providing personal and intimate care will include the following:
 - being mindful of not causing distress to the child, where possible, have two colleagues present or if that is not possible, inform a colleague when a child needs to be taken to the toilet to administer intimate care.
 - Make a record of each occasion, including time and duration, on CPOMS.
 - Consideration should be given to providing intimate care to children of the opposite sex. and when, considering this issue, attention should be paid to the age of the child his/her wishes and feelings, any expressed parental directions along with the wishes and feelings of the member of staff concerned.
 - Staff will use gloves and protective clothing.
 - Where a child has a care plan, parents will be expected to provide the school with a reserve of clothing. In an emergency the school will provide appropriate temporary clothing which parents will be expected to wash, iron and return.
- 7. 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.
- 8. Where children have identified special needs that require personal and intimate care, individual intimate care plans will be drawn up for children as appropriate to suit the circumstances of the child.
- 9. Where a child with SEN has on-going intimate care needs, arrangements will be discussed with parents/carers on a regular basis and recorded on the child's care plan.
- 10. The needs and wishes of children and parents will be taken into account wherever possible within the constraints of staffing and equal opportunities legislation.
- 11. The school's safeguarding procedures will be adhered to at all times.

HOME/SCHOOL LIASION

- When a child joins the School as part on the induction information parents/carers will be asked to sign a form (see appendix 1) that they agree to intimate care being provided by the School. If consent forms are not returned the child will not be changed in the event of an accident until the parents/ carers arrive to change the child themselves.
- 2. It is imperative that parents/carers inform the School of any medical condition which may affect the child either in the short term or on a long-term basis. Any medication must be handed in at the school office and parents must fill in a medicines form to say that they consent to a member of staff administering the medicine.
- 3. On occasions, following an accident with severe soiling parents/carers will be contacted to collect the child so that they can be appropriately supported.

OUTCOMES

This policy will play an important part in the care of pupils. It will ensure that all pupils are treated at all times with dignity and respect. We are committed to meeting the individual needs of each child and we will take full account their age, special needs disability and gender when providing personal intimate care.

Navigation P.S

Intimate Care – Permission slip

I/we give permission forClass.....

to receive intimate care from members of staff at Navigation P.S. in the event of him/her having a toileting accident/sickness i.e. cleaning, helping with changing.

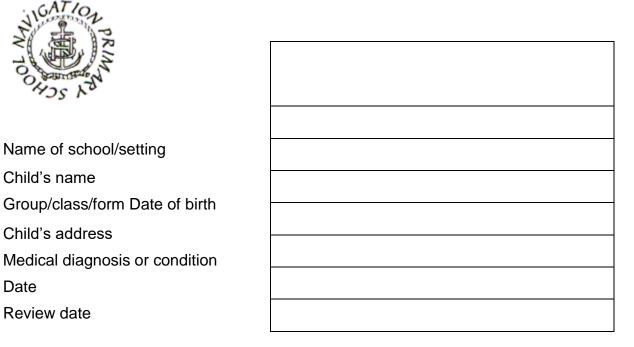
I / we will undertake to inform the head teacher of any medical complaint which affects issues of intimate care.

Signature:....

Relationship to pupil.....

Date:....

appendix 2Navigation Primary– health care plan



Family Contact Information

Name Phone no. (work) (home) (mobile) Name Relationship to child Phone no. (work) (home)

Clinic/Hospital Contact

Name Phone no.

(mobile)

G.P.

Name Phone no.

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School

Who is responsible for providing support in school

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

Name of medication, dose, method of administration, when to be taken, side effects, contraindications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc.

Other information

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (state if different for off-site activities)

Plan developed with

Staff training needed/undertaken - who, what, when