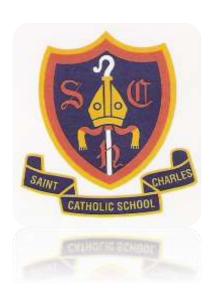
St Charles' Catholic Voluntary Academy



Intimate Care Policy

Introduction

The purpose of this policy is:

- To safeguard the rights and promote the best interests of the children;
- To ensure children are treated with sensitivity and respect, and in such a way that their experience of intimate care is a positive one;
- To safeguard adults required to operate in sensitive situations;
- To raise awareness and provide a clear procedure for intimate care;
- To inform parents/carers in how intimate care is administered;
- To ensure parents/carers are consulted in the intimate care of their children.

Principles

It is essential that every child is treated as an individual and that care is given as gently and as sensitively as possible. As far as possible, the child should be allowed to exercise choice and should be encouraged to have a positive image of his/her own body. It is important for staff to bear in mind how they would feel in the child's position. Given the right approach, intimate care can provide opportunities to teach children about the value of their own bodies, to develop their safety skills and to enhance their self-esteem. Parents and staff should be aware that matters concerning intimate care will be dealt with confidentially and sensitively and that the young persons' right to privacy and dignity is maintained at all times.

Definition

Intimate care may be any of the following:

- Supporting a pupil with dressing/undressing;
- Providing comfort or support for a distressed pupil:
- Assisting a pupil requiring medical care, who is not able to carry this out unaided;
- Cleaning a pupil who has soiled him/herself, has vomited or feels unwell.

Supporting dressing/undressing

Sometimes it will be necessary for staff to aid a child in getting dressed or undressed particularly in Early Years Foundation Stage. Staff will always encourage children to attempt undressing and dressing unaided.

Providing comfort or support

Children may seek physical comfort from staff (particularly children in Nursery and Reception). Where children require physical support, staff need to be aware that physical contact must be kept to a minimum and be child initiated. When comforting a child or giving reassurance, the member of staff's hands should always be seen and a child should not be positioned close to a member of staff's body which could be regarded as intimate. If physical contact is deemed to be appropriate staff must provide care which is suitable to the age, gender and situation of the child. 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.

Medical procedures (See Policy on Medicines)

If it is necessary for a child to receive medicine during the school day parents must fill out a permission form from the school office and discuss their child's needs with a member of staff before the school agrees to administer medicines or medical care.

Any member of staff giving medicine to a pupil should check:

- The pupil's name;
- Written instructions provided by parents or doctor;
- Prescribed dose:
- Expiry date.

Particular attention should be paid to the safe storage, handling and disposal of medicines. The Head teacher has prime responsibility for the safe management of medicines kept at school. This duty derives from the Control of Substances Hazardous to Health Regulations 2002 (COSHH). School staff are also responsible for making sure that anyone in school is safe. Medicines should generally be kept in a secure place, not accessible to pupils but arrangements must be in place to ensure that any medication that a pupil might need in an emergency is readily available. If a medical condition requires specialist treatment (insulin etc.), then it may only be administered by a member of staff who has had the appropriate training.

Soiling

Intimate care for soiling should only be given to a child after the parents have given permission for staff to clean and change the child. Parents are requested to sign a permission form so that staff can clean and change their child in the event of the child soiling themselves (Appendix 1).

If a parent does not give consent, the school will contact the parents or other emergency contact giving specific details about the necessity for cleaning the child. If the parents/carers or emergency contact is able to come within a few minutes, the child is comforted and kept away from the other children to preserve dignity until the parent arrives. Children are not left on their own whilst waiting for a parent to arrive, an adult will stay with them, giving comfort and reassurance The child will be dressed at all times and never left partially clothed.

If a parent/carer or emergency contact cannot attend, the school seeks to gain verbal consent from parents/carers for staff to clean and change the child. If the parents and emergency contacts cannot be contacted the Head teacher will be consulted. If put in an impossible situation where the child is at risk, staff will act appropriately and may need to come into some level of physical contact in order to aid the child.

If a child needs to be cleaned, staff will make sure that:

Protective gloves are worn;

- The procedure is discussed in a friendly and reassuring way with the child throughout the process;
- The child is encouraged to care for him/herself as far as possible;
- Physical contact is kept to the minimum possible to carry out the necessary cleaning;
- Privacy is given appropriate to the child's age and the situation;
- All spills of vomit, blood or excrement are wiped up and flushed down the toilet:
- Any soiling that can be, is flushed down the toilet;
- Soiled clothing is put in a plastic bag, unwashed, and sent home with the child.

Hygiene

All staff must be familiar with normal precautions for avoiding infection, must follow basic hygiene procedures and have access to protective, disposable gloves.

Protection for staff

Members of staff need to have regard to the danger of allegations being made against them and take precautions to avoid this risk. These should include:

Gaining a verbal agreement from another member of staff that the action being taken is necessary;

Allow the child, wherever possible, to express a preference to choose his/her carer and encourage them to say if they find a carer to be unacceptable;

Allow the child a choice in the sequence of care;

Be aware of and responsive to the child's reactions.

Safeguards for children

There is an obligation on local authorities to ensure that staff who have substantial, unsupervised access to children undergo police checks. All staff at St Charles Catholic Voluntary Primary School are DBS checked on application and cannot undertake tasks within school until all checks are completed satisfactorily. The DBS's aim is to help organisations in the public, private and voluntary sectors by identifying candidates who may be unsuitable to work with children or other vulnerable members of society. Personal and professional references are also required and unsuitable candidates are not permitted to work within the school.

It is not appropriate for volunteers to carry out intimate care procedures.

Policy approved and adopted September 2021 To be reviewed September 2022

APPENDIX 1

Permission form for the Provision of Care

If a child wets or soils themselves while they are at school it is important that measures are taken to have them changed (and if necessary cleaned) as quickly as possible.

Our staff will carry out this task if you wish them to do so or, if preferred, the school can contact you or your emergency contact who will be asked to attend without delay.

St. Charles Catholic Primary has an Intimate Care Policy which is available to view on our website or ask for a copy from the office.

*I do not give consent for my child to be changed and cleaned if they wet/soil themselves. The school will contact me or my emergency contact and I will organise for my child to be cleaned and changed. I understand that in the event that I (or the emergency contact) cannot be contacted the staff will act appropriately and may need to come into some level of physical contact in order to aid the child.