

Introduction

Staff who work with young children or children/young people will realise that the issue of intimate care is a difficult one and will require staff to be respectful of children's needs. Children who have difficulties in controlling their bladder and/or bowels or those that have not developed toileting skills have sometimes had a difficult start on the road to personal independence. Therefore, these children must be treated with respect, dignity and sensitivity. They should be offered choice and control in every way possible.

We recognise the approach taken to provide a child's intimate care is very important – It conveys an image about what the body is worth. A positive body image should be encouraged; routine care should be relaxed, enjoyable and fun, with lots of praise and rewards for when the child has achieved goals.

Intimate care can be defined as an activity that is required to meet the personal care needs of each individual child.

Parents have a responsibly to advise staff of the intimate care needs of their child and staff have a responsibility to work in partnership with children and parents.

Intimate care can include:

- Feeding
- Oral care
- Washing
- Dressing/undressing
- Toileting
- Menstrual Care
- Treatment such as enemas, suppositories, enteral feeds
- Catheter or stoma care
- Supervision of a child involved in intimate self-care.

St Patrick's Primary School is committed to ensuring that all staff responsible for the intimate care of children will always undertake their duties in a professional manner. 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.

Principles of Intimate care

- Every child has the right to be safe.
- Every child has the right to personal privacy.
- Every child has the right to be valued as an individual.
- Every child has the right to be treated with dignity and respect.

• Every child has the right to be involved and consulted in their own intimate care to the best of their abilities.

- Every child has the right to express their views on their intimate care and to have such views considered.
- Every child has the right to have levels of intimate care that are as consistent as possible.

School responsibilities:

All members of staff working with children are checked and vetted to ensure they are safe to do so. Only those members of staff who are familiar with the intimate care policy and all school safeguarding documentation are involved in intimate care of children.

Staff who provide intimate care are trained to do so (including Safeguarding and Manual Handling where appropriate) and are fully aware of best practice. Where basic care is required (like that normally provided by any parent or carer) then little or no training may be necessary.

Children with SEND can be especially vulnerable. Staff involved with their intimate care need to be sensitive to their individual needs. Members of staff also need to be aware that some adults may use intimate care, as an opportunity to abuse children. It is important to bear in mind that some forms of assistance can be open to misinterpretation.

If a staff member has concerns about a colleague's intimate care practice, they must report this to the Safeguarding Team within school.

Adhering to these guidelines of good practice should safeguard children and staff.

Guidelines for good practice

• If it is possible the child should be encouraged to do as much cleaning of themselves and removal / donning of clothes as is practicable.

• A second member of staff should be present (or at the very least in the vicinity).

• The cleaning and changing should be done in a place that provides privacy – but not in a completely isolated location (best practice would be for the member of staff to remain by the external doors to a toilet room – to offer advice / help / comfort as needed - and the child to clean / change themselves in a toilet cubical. Another adult should be in the vicinity.

- When changing a child on the changing station the door should be left open or f necessary and more privacy is required, the door should be left ajar and a staff member within the vicinity.
- If it appears that a child will require intimate care regularly a care plan/manual handling plan should be formulated and discussed with the child and the child's parents / guardians.
- Wherever possible the same child will not be cared for by the same adult but there will be a rota of staff within the classroom/phase who will take turns in providing care.
- An individual member of staff should inform another appropriate adult when they are going alone to assist a pupil with intimate care.
- The religious views, beliefs and cultural values of children and their families will be considered, particularly as they might affect certain practices or determine the gender of the carer.
- No member of staff will carry a mobile phone, camera or similar device whilst providing intimate care.

This plan should be communicated to all staff and as far as is possible, adhered to at all times – if there is any deviation from the plan the reasons should be documented and shared with parents / guardians as soon as possible. Consideration should be given as to what to do on school trips and discussed with parents/carers.

Volunteers are not to provide intimate care – but they may be used as a witness and assist if DBS checked.

Policy written - September 2022 Policy review – September 2024



Hygiene Room Procedures

- Ensure your hands are washed thoroughly before and after each nappy change.
- Alcohol gel may be used in addition to but not instead of hand washing.
- Wear a disposable apron and gloves whilst changing nappies or toileting children within the hygiene rooms.
- Change the disposable apron and gloves between each child.
- Use a disposable covering (blue roll) on top of the changing bed for added protection
- Change the blue roll covering following each nappy change.
- Decontaminate the changing bed following use by using the disinfected wipes. Clean both the bed and any other surrounding environmental surfaces e.g. bed rails that may have been touched during nappy changing procedures, after each and every nappy change.
- Dispose of the nappy into an individual nappy sack and then into the appropriate bin.
- Gloves and disposable apron must be disposed of using the yellow pedal bin. Ensure you use your foot and not your hands.
- Ensure the changing bed is in a good state of repair to facilitate thorough cleaning and decontamination.
- Any damage or torn equipment must be reported.

• Potties or toileting aids should be cleaned and disinfected to minimise the risk of cross infection using disinfected wipes after each use.