



**Ravenscroft
Primary School**
Explore. Achieve. Fly.

INTIMATE CARE OF PUPILS

Introduction

Ravenscroft School is committed to ensuring that all staff responsible for the intimate care of children will undertake their duties in a professional manner at all times. Ravenscroft School recognises that there is a need to treat all children with respect when intimate care is given.

Intimate care may be defined as any activity required to meet the personal care needs of each individual child. Intimate care may involve washing, touching or carrying out an invasive procedure (such as cleaning up after a child has soiled him/herself), that most children can carry out for themselves, but with which some 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 also involve help with drinking, eating, dressing, menstrual care, supervision of a child involved in intimate self-care and toileting. Help may also be needed with changing colostomy bags and other such equipment. It may also require the administration of an insulin injection, epipen or rectal medication.

In most cases intimate care will involve procedures to do with personal hygiene and the cleaning of equipment associated with the process. In the case of a specific procedure only a person suitably trained and assessed as competent will undertake the procedure. Any additional training will be provided by the school.

Our Approach to Best Practice

- Each child's right to privacy will be respected. Careful consideration will be given to each child's situation to determine how many carers might need to be present when a child needs help with intimate care. Where possible one child will be cared for by one adult, unless there is a sound reason for having two adults present. If this is the case, the reasons should be clearly documented.
- There is careful communication with each child who needs help with intimate care in line with their preferred means of communication (verbal, symbolic, etc.) to discuss the child's needs and preferences. Members of staff who provide intimate care should speak to the pupil personally by name, explain what they are doing and communicate with all children in a way that reflects their ages: The child should be aware of each procedure that is carried out and the reasons for it. Strong clues will be given that enable the child to anticipate and prepare for events. Explanations of what is happening will be given to the child in a straightforward and reassuring way.
- Staff will be supported to adapt their practice in relation to the needs of individual children taking into account developmental changes such as the onset of puberty and menstruation.
- As a basic principle children will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each child to do as much for themselves as they can. This may mean, for example, giving the child responsibility for washing themselves.
- Individual intimate care plans will be drawn up for particular children as appropriate to suit the circumstances of the child. These plans include a full risk assessment to address issues such as moving and handling, personal safety of the child and the carer and health. Parents/carers will be involved with their child's intimate care arrangements; a clear account of the agreed arrangements will be recorded on the child's care plan. The needs and wishes of children and parents will be carefully considered alongside any possible constraints; E.g. staffing. Where relevant, it is good practice to agree with the pupil and parents/carers appropriate terminology for private parts of the body and functions and this should be noted in the plan.

- Wherever possible a child will be cared for by a number of familiar adults on a regular basis. This will ensure, as far as possible, that over-familiar relationships are discouraged from developing, while at the same time guarding against the care being carried out by a succession of completely different carers.
- Records will be kept which will also note responses to intimate care and any changes of behaviour.
- All staff should be aware of the school's confidentiality policy. Sensitive information will be shared only with those who need to know.
- No member of staff will carry a mobile phone, camera or similar device whilst providing intimate care.
- All adults assisting with intimate/personal care should be staff employed by the school.
- There are designated areas in school with a supply of gloves, wipes, aprons, etc.

Staff Professional Development

- Staff will receive training in working practices which comply with Health & Safety. E.g. Staff should be fully aware of best practice regarding infection control, including the requirement to wear disposable gloves and aprons where appropriate.
- All staff will receive Safeguarding/Child Protection training as part of whole school training.
- Staff will 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.
- Staff will receive Moving and Handling training where appropriate.

The Safeguarding of Children

- Education Child Protection Procedures and Inter-Agency Child Protection procedures will be accessible to staff and adhered to.
- Where appropriate, children will be taught personal safety skills carefully matched to their level of development and understanding.
- If a member of staff has any concerns about physical changes in a child's presentation, e.g. marks, bruises, soreness etc. s/he will immediately report concerns to the Designated Safeguarding Lead. A clear record of the concern will be completed and referred to social services if necessary. Parents will be informed that a referral is necessary prior to it being made unless doing so is likely to place the child at greater risk of harm. Further details are available in the school's Early Help, Safeguarding and Child Protection Policy.
- 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. Staffing schedules will be altered until the issue(s) are resolved so that the child's needs remain paramount. Further advice will be taken from outside agencies if necessary.
- If a pupil, or any other person, makes an allegation against an adult working at the school this should be reported to the Headteacher (or to the Chair of Governors if the concern is about the Headteacher) who will consult the Local Authority Designated Officer in accordance with the school's policy: It should not be discussed with any other members of staff or the member of staff the allegation relates to.
- Similarly, any adult who has concerns about the conduct of a colleague at the school or about any improper practice will report this to the Headteacher or to the Chair of Governors, in accordance with the child protection procedures and 'whistle-blowing' policy.

This policy was agreed on	January 2018
Policy to be reviewed by	April 2020

The following documents and websites have been taken into account in the production of this policy:

- Guidance for safer working practice for those working with children and young people in education settings 2015 (page 14)
- <https://www.eric.org.uk/toileting-best-practice-at-school>
- Statutory Guidance for Supporting Pupils with Medical Conditions, DFE, Supporting pupils at school with medical conditions - Publications - GOV.UK

Appendices (separate to policy):

- Intimate Care – Individual Care Plan