St. Helen's Primary School

Intimate Care Policy

Approved	**4th March 2021**
Committee	**Standards**
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Contents

1. Policy Statement
2. Our Approach to Best Practise
3. Partnership with Parents and Carers
4. Intimate care – safeguarding children
5. COVID-19 school arrangements

Policy Statement

All children at St Helen's Primary School have the right to be safe and be treated with dignity, respect and privacy at all times so as to enable them to access all aspects of St Helen's Primary School

This policy reflects the guidance contained within the First Aid Policy Addendum in respect of the changes made in response to the COVID-19 pandemic.

This policy sets out clear principles and guidelines on supporting intimate care with specific reference to toileting. It should be considered in line with our Safeguarding Policy, Health and Safety Policies and Supporting Children in School with Medical Conditions.

This policy supports the safeguarding and welfare requirements of Early Years Foundation Stage (EYFS) Statutory Framework 2017, the Health and Safety Act 1974 and the Equality Act 2010.

St Helen's Primary will ensure that:

- No child's physical, mental or sensory impairment will have an adverse effect on their ability to take part in day-to-day activities, as far as is practicable.
- No child with a named condition that affects personal development will be discriminated against
- No child who is delayed in achieving continence will be refused admission
- No child will be sent home or have to wait for their parents/carer due to incontinence.
- Adjustments will be made for any child who has delayed continence

Intimate Care Tasks – cover any tasks that involves the dressing and undressing, washing (including intimate parts), helping someone use the toilet, changing nappies or carrying out a procedure that requires direct or indirect contact to an intimate personal area.

2. Our approach to best practice

The issue of intimate care is a sensitive one and will require staff to be respectful of the child's needs. The child's dignity should always be preserved with a high level of privacy, choice and control.

Staff behaviour must be open to scrutiny and staff must work in partnership with parents/carers to provide continuity of care to children/young people wherever possible. St Helen's Primary 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.

2.1 It is expected that children of normal, chronological development will be able to independently use the toilet by the time they attend school. The school can seek advice, and guidance for parents can be sought on their behalf from relevant agencies if required.

2.2 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. Individual intimate care plans will be drawn up for particular children as appropriate to suit the circumstances of the child. (See Appendix 1)

2.3 Each child's right to privacy will be respected. Careful consideration will be given to each child's situation. It should be noted that the school may sometimes use an Individual Health Care Plan where the reasons for the intimate care overlap with an existing health concern that affects continence. This will be discussed and planned at the point of writing the Intimate Care Plan or the Individual Health Care Plan. All care will be recorded in a log book. The date, time and nature of the intimate care will be recorded.

2.4 Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the child's Intimate Care Plan (see Appendix 1). The needs and wishes of children and parents will be adhered to wherever possible. Parents, the Headteacher, Senior Leaders, Classroom Teacher and other key personnel will work

together to produce a personalised intimate care plan/individual care plan. Each situation will be assessed individually, and in some cases, it may be necessary for the school to ask parents or carers to come in to school to assist with personal care for their children.

3. Partnership with Parents/Carers

A Care Plan will be drawn up in agreement with home and school. This care plan will outline:

1. Details of need e.g.: what tasks children are able to do by themselves; respect for any cultural or religious sensitivities related to aspects of intimate care etc.
2. Facilities/equipment: in school there is currently a changing space in EYFS; a changing table and/or mat will also be provided
3. Staffing: which staff will be involved – including alternative arrangements if key staff are absent
4. Be regularly monitored and reviewed in accordance with the child's development

Parents/Carers are asked to supply the following:

- Spare nappies
- Wipes, creams, nappy sacks etc…
- Spare Clothes
- Spare underwear

4. Intimate care – safeguarding children

All staff at St Helen's Primary School are trained on the signs and symptoms of child abuse. If a member of staff is concerned about any physical or emotional changes such as marks, bruises, soreness, distress etc they will inform a Designated Person immediately. Should a child become unhappy about being cared for by a particular member of staff, the Designated Person will look into the situation and record any findings. These will be discussed with the child's parents/carers in order to resolve the problem. If necessary, the Designated Person will seek advice from other agencies. If a child makes an allegation against a member of staff, the procedure set out in the Safeguarding Policy will be followed.

St. Helen's has a Designated Safeguarding Lead (DSL) and a Deputy DSL. The Designated Safeguarding Lead is: Julia Walker and the Deputy Designated Safeguarding Lead is: Laura Miller

5. COVID-19 school arrangements

Safe Working Practices whilst dealing with body fluids.

If a person has suspected COVID-19, wherever possible, they will be asked to move to a location away from others. The designated room for this is the area outside the Head Teachers room. If there is no physically separate room (the designated room may already be occupied), or the individual is not able to move to another room, all other persons not required to assist in dealing with body fluids will leave the vicinity.

Where a close contact response is needed (for symptomatic people), the following equipment is required:

- Disposable gloves
- Plastic apron
- Fluid repellent surgical mask
- Disposable eye protection (where there is an anticipated risk of contamination with splashes, droplets of blood or body fluids)
- Resus face shield
- Hand sanitiser
- Two bin bags
- Disinfectant wipes (for cleaning equipment box)

Public Health have confirmed that PPE is not required for treatment of non-symptomatic people.

Urine, faeces, blood and vomit will be cleaned up immediately and disposed of safely with waste compound being sprinkled on top, and cleaned up by the Site Manager, or member of cleaning staff. This will be disposed of in a medical waste bin, after double bagging in line with normal practice.

When dealing with body fluids of a non-symptomatic person, staff wear protective clothing (disposal plastic gloves and aprons) wash themselves thoroughly afterward. Soiled children's clothing with be bagged to go home; staff will not rinse it.

Personal Protective Equipment (PPE) – to support previous guidance

Storing PPE- If a person in need of intimate care has suspected COVID-19, PPE must be used.

PPE is kept in the First Aid cupboard.

Using PPE- The School has designated staff to support children with suspected symptoms. All staff who use PPE have been issued the national guidance (COVID-19 Personal Protective Equipment Guidance) and informed they need to familiarise themselves with the instructions for donning and doffing PPE (https://www.youtube.com/watch?v=kKz_vNGsNhc)

Appendix 1

The aim of this document is to put a procedure in place that: • Safeguards the dignity, rights, and well-being of XXXX • Provide guidance and support to staff • Parents are reassured that their children are cared for and protected.		
Child's name	**Date in place**	**Review Date**
Nominated Staff		
Main Area of Need •		
Detailed Plan 1.		
This plan was written by _____ on _____ This plan was agreed with parents/carers on _____ The child's views were sought for this plan on _____ (if not, please state why not):		
Signed (Headteacher) _____ Date _____ Signed (TA, Support staff) _____ Date _____ _____ Date _____ _____ Date _____ Signed (Parent/carer) _____ Date _____		