

ST MARY MAGDALENE CE PRIMARY SCHOOL

Agreed Whole School Policy

Intimate Care Policy



STATUS: DRAFT AGREED

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Filename: # SMMS Intimate Care

Signed Name Date

As a Church of England School, we recognise that each person is valuable, precious and **unique** before God. Our school is a community based on **trust, honesty** and **love**. We aim to live in **peace** with each other and to **forgive** those who have wronged us, as taught and demonstrated in the life of Jesus. We seek to foster in our members **wonder** in discovery, **thankfulness** for what we have, **compassion** for others and **hope** for the future. We therefore strive to ensure that our delivery of the curriculum meets the needs of each individual and helps foster an environment where the motivation for all to achieve and reach their full potential is at the core of our commitment.

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Intimate Care Policy

Vision Statement

Building on a foundation of Core Christian Values, we inspire and equip our children to acquire confidence, encouraging a thirst for lifelong learning.

'I can do all things through Christ who strengthens me,' Philippians 4: 13.

Rationale

It is our intention to develop independence in each child, however there will be occasions when help is required. Our intimate care policy has been developed to safeguard children and staff. It is one of a range of specific policies that contribute to our pastoral care policy. The principles and procedures apply to everyone involved in the intimate care of children.

St Mary Magdalene 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. It is acknowledged that these adults are in a position of great trust.

St Mary Magdalene School recognises that there is a need to treat all children, whatever their age, gender, disability, religion or ethnicity, with respect when intimate care is given. The child's welfare and dignity is of paramount importance. No child should be attended to in a way that causes distress or pain.

Staff will work in close partnership with parent/carers and medical professionals to share information and provide continuity of care.

Definition

Intimate care may be defined as any activity that is required to meet the personal needs of an individual child on a regular basis or during a one-off incident. Such activities can include:

- feeding
- oral care
- washing
- changing clothes
- toileting
- first aid and medical assistance
- supervision of a child involved in intimate self-care.

Parents have a responsibility to advise the school of any known intimate care needs relating to their child. The school recognises that the need to carry out a procedure to intimate personal areas, which most people usually carry out themselves, may be necessary because the child is unable to do so themselves. Circumstances such as this may arise because of a child's young age, physical difficulties or other special needs.

Principles of Intimate Care

The following are the fundamental principles of intimate care upon which our policy guidelines are based:

- 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

- all children have the right to be involved and consulted in their own intimate care to the best of their abilities
- all children have the right to express their views on their own intimate care and to have such views taken into account
- every child has the right to have levels of intimate care that are appropriate and consistent.

School Responsibilities

All staff working with children are DBS [Disclosure and Barring Service] checked. Only those members of staff who are familiar with the intimate care policy and other pastoral care policies of the school are involved in the intimate care of children.

There will always be two members of staff present when the intimate care of a child is carried out.

Individual Healthcare Plans

Where anticipated, intimate care arrangements are agreed between the school and parents and, if appropriate, by the child. Consent forms are signed by the parent and stored in the child's file.

Children who require regular assistance with intimate care have Care Plans or Education, Healthcare Plans (EHCPs) agreed by staff, parents/carers and any other professionals actively involved, such as school nurses or physiotherapists.

Any historical concerns (such as past abuse) should be noted and taken into account.

Intimate care arrangements will be reviewed annually. The views of all relevant parties will be sought and considered to inform future arrangements. Training is provided by the relevant Healthcare professionals (Physiotherapists/Occupational therapists or School Nurse). This is monitored and the school is aware that this may change in response to the needs of individual pupils. Once trained, it is the responsibility of the Deputy Head Teacher in consultation with the Head Teacher to ensure that training is kept up to date and any problems or concerns regarding pupils should be brought to their attention.

Emergency care

St Mary Magdalene staff are aware that young children and children with special educational needs can be especially vulnerable. Staff involved with their intimate care need to be particularly sensitive to their individual needs.

Only in emergency would staff undertake any aspect of intimate care that has not been agreed by parents and school.

Where a care plan is not in place, parents/carers will be informed the same day if their child has needed help with meeting intimate care needs (e.g.: has had an 'accident' and soiled him/herself). It is recommended practice that information on intimate care should be treated as confidential and communicated in person, by telephone, by sealed letter or a specific home/school diary.

Guidelines for Good Practice

All children have the right to be safe and to be treated with dignity and respect. These guidelines are designed to safeguard children and staff. They apply to every member of staff involved with the intimate care of children.

It is important to bear in mind that some forms of assistance can be open to misinterpretation. Adhering to the following guidelines of good practice should safeguard both the child and staff:

Involve the child in the intimate care

At St Mary Magdalene we will try to encourage the child's independence as far as possible in his or her intimate care. All children will be supported to achieve the highest level of autonomy that is possible given their age and abilities.

Where a situation renders a child fully dependent, staff will talk about what is going to be done and give choices where possible.

Communication with Children

It is the responsibility of all staff caring for a child to ensure that they are aware of the child's method and level of communication. Depending on their maturity and levels of stress children may communicate using different methods- words, signs, symbols, body movements, eye pointing etc. Where the child is of an appropriate age and level of understanding permission should be sought before starting an intimate procedure.

To ensure effective communication staff will:

- make eye contact at the child's level
- use simple language and repeat if necessary
- wait for response
- continue to explain to the child what is happening even if there is no response
- treat the child as an individual with dignity and respect

Be aware of your own limitations

Staff at St Mary Magdalene will only carry out activities they understand and feel competent with. If in doubt they must ASK. Some procedures must only be carried out by members of staff who have been formally trained and assessed.

Promote positive self-esteem and body image.

Confident, self-assured children who feel their body belongs to them are less vulnerable to sexual abuse. The approach taken to intimate care can convey lots of messages to a child about their body worth. The staff's attitude to a child's intimate care is important. Keeping in mind the child's age, routine care can be both efficient and relaxed.

Working With Children of The Opposite Sex

Wherever possible staff should care for a child of the same gender. However, in some circumstances this principle may need to be waived; for example, female staff supporting boys in a primary school.

The religious views and cultural values of families should be taken into account, particularly as they might affect certain practices or determine the gender of the carer.

All staff should be aware of the school's confidentiality policy. Sensitive information will be shared only with those who need to know.

Safeguarding

If there are any observations of unusual markings, discolouration or swelling, staff must report it immediately to the designated person for child protection.

If a child is accidentally hurt during the intimate care or misunderstands or misinterprets something, staff should reassure the child, ensure their safety and report the incident immediately to the designated person.

Report and record any unusual emotional or behavioural response by the child. A written record of concerns must be made available to parents and kept in the child's personal file.

If a staff member has concerns about a colleague's intimate care practice he or she must report this to the designated person for child protection.

If you have any concerns, you must report them.

Monitoring and Evaluation

We aim to work in partnership with parents, governors, health professionals, school staff and children to ensure the successful implementation of this Policy. This policy will be reviewed by every two years by the Deputy Headteacher in consultation with the Headteacher. Advice from the appropriate healthcare professionals will be sought where necessary and recommendations for improvement will be made to the Governors.