



# Hayes Meadow Primary School

## Intimate Care policy

### **Aim**

At Hayes Meadow Primary School we are committed to ensuring that all staff responsible for intimate care of children and young people will undertake their duties in a professional manner at all times.

The school takes seriously their responsibility to safeguard and promote the welfare of the children and young people in their care.

The Governing Body recognises its duties and responsibilities in relation to the Equality Act 2010, which requires that any child with an impairment that affects his/her ability to carry out normal day-to-day activities must not be discriminated against.

We recognise that there is a need for children and young people to be treated with respect when intimate care is given.

No child shall be attended to in a way that causes distress, embarrassment or pain.

Staff will work in close partnership with parents and carers to share information and provide continuity of care.

### **Definition:**

Intimate care is defined as any care which involves washing, touching or carrying out an invasive procedure that most children and young people carry out for themselves, but which some are unable to do. Disabled pupils may be unable to meet their own care needs for a variety of reasons and will require regular support.

### **Care Plans:**

Individual care plans will be drawn up for any pupil requiring regular intimate care, these will be shared with parents and staff.

Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the care plan.

The needs and wishes of children and parents will be taken into account wherever possible, within the constraints of staffing and equal opportunities legislation

Where a care plan is not in place and a child has needed help with intimate care (in the case of a toilet 'accident') then parents/carers will be informed the same day. This information should be treated as confidential and communicated in person or via telephone.

### **Our approach to best practice:**

- The management of all children with intimate care needs will be carefully planned.
- Staff who provide intimate care are trained to do so (by nurses where appropriate including Child Protection) and fully aware of best practice.
- Sometimes it will be necessary for staff to aid a child in getting dressed or undressed particularly in Early Years. Staff will always encourage children to attempt undressing and dressing unaided.
- Children may seek physical comfort from staff - particularly the children in Reception. Where children require physical support, staff must 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 suitable to the age, gender and situation of the child.

### **Dealing with blood and bodily fluids:**

Blood, vomit, urine and faeces will be cleaned up immediately and disposed of safely by bagging the waste. When dealing with body fluids, staff will wear protective clothing (plastic gloves), and will wash themselves thoroughly after cleaning the child. Soiled children's clothing will be bagged to go home – staff will not rinse it.

When touching a child, staff should always be aware of the possibility of invading a child's privacy and will respect the child's wishes and feelings. If a child needs to be cleaned, staff will make sure that:

- They inform another member of staff that they are changing a child – **two members of staff should be in attendance.**
- 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.

### **Medicine:**

If it is necessary for a child to receive medicine during the school day parents must fill out a permission form from the school (these are kept in the school office) and discuss their child's needs with a member of staff before the school agrees to administer medicines or medical care. It must be made clear to parents that staff administration of medicines is voluntary. 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
- Record in the medicine given folder (kept in the office)

Medicines should generally be kept in the school office/staffroom fridge, 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.

Where specialist equipment and facilities above that currently available in the school are required, every effort will be made to provide appropriate facilities in a timely fashion, following assessment by a Physiotherapist and/or Occupational Therapist.

Pupils will be supported to achieve the highest level of independence possible, according to their individual condition and abilities

### **Safeguarding:**

At Hayes Meadow, safeguarding and child protection is paramount and we are fully committed to ensuring the welfare and safety of all our children. We believe that students have a right to learn in a supportive, caring and safe environment which includes the right to protection from all types of abuse; where staff are vigilant for signs of any student in distress and are confident about applying the processes to avert and alleviate any such problems.

Child Protection and Multi-Agency Child Protection procedures will be adhered to at all times. If a child becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be investigated at an appropriate level and outcomes recorded.

Parents/carers will be contacted at the earliest opportunity as part of the process of reaching a resolution. Further advice will be taken from partner agencies.

If a child makes an allegation about a member of staff, this will be investigated in accordance with agreed procedures.

If a member of staff has any concerns about physical changes in a child's presentation (unexplained marks, bruises or soreness for example) s/he will immediately report concerns to the Designated Safeguarding Lead for Child Protection Mrs. Sivieri (Headteacher) or one of the Deputy Designated Safeguarding Leads Mrs. Morgan or Mrs. Gilbert.

Policy last updated February 19'