

Hevingham and Marsham Primary School Partnership Intimate Care Policy

Introduction:

Hevingham and Marsham Primary School Partnership is 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.

This school takes seriously its responsibility to safeguard and promote the welfare of the children and young people in its 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.

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 (including Child Protection, and Moving and Handling where appropriate) and fully aware of best practice.
- 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.
- There is careful communication with any pupil who requires intimate care in line with their preferred means of communication to discuss needs and preferences.
- 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.
- Pupils will be supported to achieve the highest level of independence possible, according to their individual condition and abilities

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- Individual care plans will be drawn up for any pupil requiring regular intimate care
- Careful consideration will be given to individual situations to determine how many adults should be present during intimate care procedures. Where possible one pupil will be cared for by one adult unless there is a sound reason for having more adults present. In such a case, the reasons will be documented.
- 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, via telephone or by sealed letter (not via the home school diary)

Child Protection:

The Governors and staff of Hevingham and Marsham Primary School Partnership recognise that disabled children are particularly vulnerable to all forms of abuse.

Child Protection and Multi-Agency Child Protection procedures will be adhered to at all times.

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 Person for Child Protection.

If a child becomes distressed or unhappy about being cared for 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.

This policy will be adopted in **March 2016**. The date of the next formal review will be as required.

Policy approved by the Governing Body of Hevingham and Marsham Primary School Partnership.

signed **Chair, Staff**

dated



Norfolk County Council

Intimate Care Guidance

Appendix 1 - Toileting plan discussion with parents/carers

Record of discussion with parents/carers

Pupil's name:..... DoB.....

Date of meeting:.....

Persons present.....

	Details	Action
Working towards independence, e.g. taking pupil to toilet at timed intervals, rewards		
Arrangements for nappy changing, e.g. who, where, privacy		
Level of assistance needed, e.g. undressing, hand washing, dressing		
Moving and handling needs, e.g. equipment, training needs, hoisting equipment		
Infection control, e.g. wearing gloves, nappy disposal		
Sharing information, e.g. nappy rash, infection, family/cultural customs		
Resources needed, e.g. toilet seat, step, nappies, creams, nappy sacks, change of clothes, gloves		
Other		

Intimate Care Guidance

Appendix 2 - Permission form

Permission for school to provide intimate care

Pupil's name:.....

DoB:.....

Parent/Carer name(s):.....

Address:.....

.....

.....

I/We give permission for school to provide intimate care to my/our child.

I/We will advise the school of anything that may affect issues of personal care (if medication is changed or my child has an infection for example)

I/We understand the procedures that will be carried out and will contact the school immediately if there are any concerns.

Signature:.....

Name:.....

Relationship to child:.....

Date:.....



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Appendix 3 - Recording sheet

Record of intimate care intervention

Child's name..... DoB.....

Name(s) of staff involved.....

Date	Time	Procedure	Signature(s)	Comments

Intimate Care Guidance

Appendix 4 - Intimate care checklist (can be used as preparation for plan)

Planning for intimate care

Pupil's name:..... DoB.....

Admission date

	Discussion	Actions
<p>Facilities</p> <p>Suitable toilet identified? Adaptations required?</p> <ul style="list-style-type: none"> • Changing table/bed • Grab rails • Step • Locker for supplies • Hot and cold water • Lever taps • Mirror at suitable height • Disposal unit/bin • Hoist • Other moving and handling equipment • Emergency alarm • Other 		
<p>Family provided supplies</p> <ul style="list-style-type: none"> • Nappies/pads • Catheters • Wipes • Spare clothes • Other 		
<p>School provided supplies</p> <ul style="list-style-type: none"> • Toilet rolls • Antiseptic cleanser • Cloths/paper towels • Soap • Disposable gloves/aprons • Disposal sacks • Urine bottles • Bowl/bucket 		

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<ul style="list-style-type: none"> • Milton/sterilising fluid • Other 		
<p>Good practice</p> <ul style="list-style-type: none"> • Advice sought from Health professionals? • Moving and Handling Co-ordinator? • Parent/carer views • Pupil's views • How does child communicate? • Agree use of language to be used • Preferences for gender of carer • Training required for staff? • Awareness raising for all staff • Other 		

<p>PE issues</p> <ul style="list-style-type: none"> • Discreet clothing required? • Privacy for changing? • Other <p>Specific advice for swimming</p> <ul style="list-style-type: none"> • From parents/carers • From Health professionals • Moving and Handling Co-ordinator 		
<p>Support</p> <p>Designated staff Back-up staff Training for back-up staff Transport School visits After school clubs</p> <p>Toilet management/intimate care plan to be prepared</p> <ul style="list-style-type: none"> • By whom • When • To be reviewed when 		

Intimate Care Guidance

Appendix 5 – Frequently asked questions

What if we have nowhere to change children?

If your school has no accessible toilet with a changing bed then it may be necessary to change the child in an alternative private and hygienic area. This should be a temporary arrangement (reasonable adjustment) and you should contact Children's Services Planning and Buildings on 01603 222028 to discuss provision of suitable facilities. There may be financial support towards building works for disabled pupils but schools should be aware that they have to make a contribution from Devolved Formula Capital.

All schools should be planning to improve access for disabled pupils in their Access Plan as required by the Special Educational Needs and Disability Act 2001.

Is it OK to leave a child until parents arrive to change them?

Ask yourself if you would leave an injured child until the parents arrived. Leaving a child in a soiled nappy, or wet or soiled clothing for any length of time is a form of abuse. Asking the parents of a disabled child to attend school to change them is likely to be in breach of the Disability Discrimination Act.

Won't that mean that adults will be taken out of the classroom?

Yes, but changing a child is unlikely to take more than ten minutes or so – not dissimilar to the amount of time that might be allocated to work with a child on an individual learning target. The time spent changing the child can be a positive and learning time. If a child needs changing on a regular basis, then preparing a care plan will clarify whether additional adult support, above that usually provided in the classroom, will be necessary to meet an individual pupil's needs.

Who provides the nappies?

Parents are responsible for the provision of nappies. Families will usually receive nappies from the Continence Service who may ask school how many nappies they require in order to calculate how many to supply to parents.

Do we have to dispose of nappies?

Nappies can be disposed of with normal waste unless there are very large quantities involved. Wet nappies should be single bagged and soiled nappies double bagged.

Is it OK to lift the child?

If an individual child needs help to get onto the toilet or onto the changing bed for example, then you should seek advice from the Moving and Handling Co-ordinator. To ensure the safety of both staff and pupils a risk assessment

must be carried out and appropriate equipment obtained. Some disabled children will need hoisting for intimate care and that should only be carried out by trained staff.

What if a member of staff refuses to change a child who has soiled?

The Disability Discrimination Act is clear that children should be protected from discrimination and so a child who has soiled should be changed and enabled to return to the classroom as soon as possible to resume learning. The issue should not arise if designated support staff have been advised on appointment and induction and existing support staff trained in relation to the school's duties under DDA.

Is it true that men cannot be involved in intimate care procedures?

No. There is a positive value in both male and female staff being involved in intimate care tasks. All designated staff of whatever gender are CRB checked and given training in good practice. Male staff members will not usually be involved in the intimate care of girls. Where cultural or family reasons make a carer of the opposite sex unacceptable this must be respected.

Why does the child keep soiling when the family has told us that she is constipated?

Medication to resolve constipation difficulties will often result in leakage. The medication can take some time to resolve problems and the child may need more frequent care during this time. Health professionals involved with the child's treatment will be able to advise.

How do we stop the other children teasing him?

The Disability Equality Duty means that schools have a duty to eliminate the harassment of disabled people. Changing a child promptly and discretely will minimise the attention drawn to him. Reasonable adjustments might include allowing privacy when changing for PE, appropriate clothing to avoid drawing attention to a nappy and systems for leaving class without fuss. The school should consider whether its anti-bullying policy addresses bullying of disabled pupils and if the curriculum celebrates difference and promotes positive attitudes towards disabled people.

What if a child seems upset or anxious about his personal care?

If it is new or changed behaviour then it is important to ask the family whether anything has happened that may have led to the change. If you remain concerned you should follow normal Child Protection procedures.

What should I do if I am uncomfortable with what I have been asked to do?

Any intimate care procedures should be agreed by all concerned and you should feel able to request a review at any time. Speak to senior staff at school immediately expressing your concerns.