



**SHIRLEY COMMUNITY PRIMARY SCHOOL  
AND SHIRLEY PRE-SCHOOL**

**INTIMATE CARE POLICY**

This is a Non-Statutory Policy

|                     |                     |
|---------------------|---------------------|
| Date of Adoption    | 26th September 2019 |
| Date of Last Review | 26th September 2019 |
| Date of Next Review | September 2021      |
| Committee           | Full Governing Body |

## **What is Intimate Care?**

Intimate care encompasses areas of personal care, which most people usually carry out for themselves but some people may be unable to do because of an impairment or disability. Children or young people might require help with eating, drinking, washing, dressing, toileting and helping to deal with menstruation.

## **Introduction**

At Shirley Primary School and Shirley Pre-school, we recognise that all children have different rates of development and differing needs. Most children achieve continence before starting full-time school. With the development of more early years' education and the drive towards inclusion, however, there are many more children in mainstream educational establishments who are not fully independent. Some children remain dependent on long-term support for personal care, while others progress slowly towards independence. The achievement of continence can be seen as the most important single self-help skill, improving the person's quality of life, independence and self-esteem. The stigma associated with wetting and soiling accidents can cause enormous stress and embarrassment to the children and families concerned. Difficulties with continence severely inhibit a child's inclusion in school and the community. Children with toileting problems who receive support and understanding from those who act in loco parentis, are more likely to achieve their full potential. Every plan supporting intimate care must demonstrate how the child/young person can be enabled to develop their independence as far as is reasonably practical for the child/young person.

Shirley 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.

Children's dignity will be preserved and a high level of privacy, choice and control will be provided to them. Staff who provide intimate care to children have a high awareness of child protection issues. Staff behaviour is open to scrutiny. Staff at Shirley school in partnership with parents/carers will provide continuity of care to children wherever possible.

Staff deliver a curriculum which covers topics on safety, hygiene and health, as part of PSED, to all children as appropriate to their developmental level and degree of understanding. This work is shared with parents who are encouraged to reinforce the personal safety messages within the home.

## **Our Approach to Best Practice**

The management of all children with intimate care needs will be carefully planned and should be a positive experience for all involved. The child who requires intimate care is treated with respect at all times; the child's welfare and dignity is of paramount importance.

Staff who provide this care are trained to do so (including Safeguarding and Child Protection and Moving and Handling Training) and are fully aware of best practice, including having read the Dept for Children Schools and Families (DCSF) now the Department of Education Guidance for Safer Working practice for Adults who work with

children and young people in Education Settings. Suitable equipment and facilities can be identified to assist with children/young people who need special arrangements by an assessment from an Occupational Therapist (OT).

It is the school's responsibility to support staff that are carrying out intimate care procedures. Advice can be given by contacting the occupational therapy service, school nurse or the Education Child Protection Service as required. Whenever possible staff who are involved in the intimate care of children will not usually be involved with the delivery of sex and relationships education to the children/young people in their care as an additional safeguard to both staff and children involved. If staff are involved care should be taken to ensure that resource materials cannot be misinterpreted and clearly relate to the learning outcomes identified by the lesson plan. This plan should highlight particular areas of risk and sensitivity.

**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 be as independent as possible. This may mean, for example, giving the child responsibility for wiping/washing themselves or removing articles of soiled clothing. For children at the early stages of toilet training, targets for developing those skills will be discussed and agreed with parents.

**Where needed individual care plans will be drawn up as appropriate and shared and agreed with the child and their parent/carers (see appendix 2)**

Each child/young person's right to privacy will be respected. Careful consideration will be given to each situation to determine how many staff need to be present when the child/young person is being cared for. Where possible one child will be catered for by one adult unless there is a sound reason for having more adults present. In this case, the reasons should be clearly documented and reassessed regularly.

Wherever reasonable and practical staff should only care intimately for an individual of the same sex. However, in certain circumstances this principle may need to be waived where failure to provide appropriate care would result in negligence, for example female staff supporting boys when there is no male 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/young people and parents will be taken into account wherever possible within the constraints of staffing and equal opportunities legislation.

### **Safeguarding Children**

Cambridgeshire Local Safeguarding Children Board (LSCB) Safeguarding Interagency Procedures will be adhered to alongside the school safeguarding and child protection policy and procedures.

All children will be taught personal safety skills as part of Personal Social and Health Education (PSHE) relative to their age, ability and understanding. Research indicates that children with an awareness of personal safety and the ability to be assertive are more resilient to abuse. These skills will be shared with parents/carers to enable them to be consolidated within the home.

If a member of staff has any concerns about physical or behavioral changes in a child/young person's presentation, e.g. marks, bruises, soreness or reluctance to go to certain places/people etc. s/he will immediately pass their concerns to the Designated Person for child protection in their school (**see appendix 1 for designated persons for child protection**).

If a child/young person is displaying inappropriate sexual behavior/language, advice should be sought from the appropriate source (e.g. In schools this might be: Designated Person for Child Protection, School Nurse, Social Care, Education Child Protection Service, Cambridgeshire Sexual Behaviour Service)

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, following the Interagency Procedures will be taken from outside agencies as necessary.

If a child makes an allegation against a member of staff, the procedures for Allegations Against Staff will be followed as outlined in the school's Safeguarding and Child Protection policy. All staff involved in intimate care are required to have read the School's Policy and Guidance for Intimate Care and the DfE Guidance for Safer Working Practice as previously mentioned. Be aware of the need to refer to other policies the school/setting may have in place for clarification of practices and procedures.

This Policy and appendix was adopted by the Governing Body of Shirley Community Primary School and Shirley Pre-school on 26 September 2019.

(signed) Chair of GB

Mark Broadbent

Date

26th September 2019

This policy will be reviewed on a bi annual basis or more frequently if updates are received from the LA.

## **Appendix 1**

### Designated Persons for Child Protection

John Cattermole  
Hannah Kidney  
Suzanne Wernham  
Claire Fonseca  
Fiona Willis  
Natasha Reay  
Jane Taylor  
Anita Kozicz

## Appendix 2

### Intimate Care Plan

|                     |  |             |                 |  |
|---------------------|--|-------------|-----------------|--|
| Child/Young Person: |  |             | School/Setting: |  |
| DOB:                |  | Male/Female | Date:           |  |

#### Description of Intimate Care Needs

Task: If practical, it may be possible to identify one part of the intimate care procedure which gives the child/young person an opportunity to have a little more independence. If so the plan can then assist in the development of this part of the whole task.

#### Action Plan – Describe the steps needed to achieve this task

- 1.
- 2.
- 3.
- 4.

The following people will be assisting in the above activities:

Named Person: .....  
.....  
.....

Additional people who may be involved to cover when the named people are absent:

.....  
.....

I am in agreement with the above procedures being undertaken: (Please sign as appropriate)

Person for whom the plan is .....

Parent/Carer .....

SENCO/Inclusion officer .....

Teacher ..... named person .....

Named person..... named person.....

Date ..... Date for review .....



