

Introduction

Staff who work with young children or children with special education needs and disabilities (SEND) will realise that the issue of intimate care is a difficult one and will require staff to be respectful of children's needs. Children who have difficulties controlling their bladder or bowels or those that have not developed toileting skills have sometimes had a difficult start on the road to personal independence. Therefore, these children must be treated with respect, dignity, and sensitivity. They should be offered choice and control in every way possible.

At Northern Schools Trust, we encourage and promote independence and self-help skills as much as possible and give the child sufficient time to achieve. If handled correctly, this can be one of the most important single self-help skills achieved, improving the child's quality of life, independence, and self-esteem. Children who are recognised as following a typical pattern of development, in line with the Developmental Matters framework, should be independently accessing the toilet by the time they are 3 years old. Whilst we will ensure children's intimate care needs are met whilst in our care, we do actively encourage parents to work alongside school to ensure their child meets this age-appropriate milestone.

We recognise the approach taken to provide a child's intimate care is very important – it conveys an image about what the body is worth. A positive body image should be encouraged; routine care should be relaxed, enjoyable, and fun, with lots of praise and rewards for when the child has achieved goals.

Intimate care is defined as an activity that is required to meet the personal care needs of each individual child. Parents have a responsibility to advise staff of the intimate care needs of their child and staff have a responsibility to work in partnership with children and parents. Intimate care can include:

- Feeding
- Providing first aid assistance
- Providing comfort to a distressed child
- Dressing/Undressing
- Toileting
- Washing
- Menstrual care
- Oral care
- Medical procedures
- Supervision of a child involved in intimate self-care.

Northern Schools Trust 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. We recognise that there is a need to treat all children with respect when intimate care is given. No child should be attended to in a way that causes distress or pain.

Principles of intimate care

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

School responsibilities

All members of staff working with children are checked and vetted to ensure they are safe to do so. Only those members of staff who are familiar with the intimate care policy and all school safeguarding documentation are involved in intimate care of children.

Staff who provide intimate care are trained to do so (including Safeguarding and Manual Handling where appropriate) and are fully aware of best practice. Where basic care is required (similar to that normally provided by any parent or carer) then little or no training may be necessary.

Children with special needs can be especially vulnerable. Staff involved in their intimate care need to be sensitive to their individual needs. Members of staff also need to be aware that some adults may use intimate care as an opportunity to abuse children. It is important to bear in mind that some forms of assistance can be open to misinterpretation.

If a staff member has concerns about a colleague's intimate care practice, they must report this to the Safeguarding Team within school.

Adhering to these guidelines of good practice should safeguard children and staff.

Four Golden Rules:

1. If it is possible, the child should be encouraged to do as much cleaning of themselves and removal/donning of clothes as is practicable.
2. A second member of staff should be present (or at the very least in the vicinity).
3. The cleaning and changing should be done in a place that provides privacy – but not in a completely isolated location.
4. If it appears that a child will require intimate care regularly, a care plan should be formulated and discussed with the child and the child's parents/guardians. This plan should be communicated to all staff and as far as possible adhered to at all times. If there is any deviation from the plan, the reasons should be documented and shared with parents/guardians as soon as possible. Consideration should be given as to what to do on school trips and discussed with parents/guardians.

Guidelines for good practice

- All children will be supported to achieve the highest level of independence possible according to their individual needs.
- Sensitive arrangements will be put in place to allow children to toilet themselves at intervals to suit their needs and not at the demands of school routine or class requirements.
- It is important to take into account a child's preferences. If the child indicates a preference for a particular sequence, then this should be followed rather than a sequence imposed by a member of staff. As long as all the necessary tasks are completed for the comfort and wellbeing of the child, the order in which they are completed is not important.
- Staff who provide intimate care are training in personal care (for example, Manual Handling) according to the needs of the pupil. Staff should be fully aware of best practice regarding infection control, including the requirement to wear disposable gloves and aprons where appropriate (See Appendix 1).
- 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.
- An individual member of staff should inform another appropriate adult when they are going alone to assist a child with intimate care.
- The religious views, beliefs and cultural values of children and their families will be taken into account, particularly as they might affect certain practices or determine the gender of the carer.
- No member of staff will carry a mobile phone, camera or similar device whilst providing intimate care.

Involve the child in their intimate care

Try to encourage a child's independence as far as possible in his/her intimate care. Where the child is fully dependent, talk with them about what is going to be done and give them a choice where possible.

Treat every child with dignity and respect, and ensure privacy appropriate to the child's age and situation

Intimate care involves supporting children with toileting and/or cleaning, where intimate physical contact may occur. If a toilet management plan has been agreed by parents, children and staff involved, it is acceptable for only one member of staff to assist. On all other occasions, two adults will be in attendance.

Make sure practice in intimate care is consistent

As a child can have multiple carers, a consistent approach to care is essential. Effective communication between parents/guardians, staff and agencies (e.g., OT) ensures practice is consistent.

Be aware of own limitations

Only carry out care activities you understand and feel competent and confident to carry out. If in doubt, ASK. Some procedures must only be carried out by staff who have received additional training.

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 conveys a lot of messages to a child about their body worth. Staff attitudes to a child's intimate care are important. Keep in mind the child's age, routine care can be relaxed, enjoyable and fun.

If you have any concerns, you must report them

If you observe any unusual marking, discolorations or swelling, including the genital area, you must immediately report it to the school Safeguarding Team. If during the intimate care of a child, you accidentally hurt them, or the child misunderstands or misinterprets something, reassure the child, ensure their safety and report the incident immediately. Record and report any unusual emotional or behavioural response by the child. Parents/Guardians will be informed of concerns unless this puts the child at risk, the school will follow Safeguarding procedures.

Working with children of the opposite sex

There is a positive value in both male and female staff being involved with the children. Ideally, every child should have a choice for intimate care, but the current ratio of female to male staff means that assistance will more often be given by a woman. The intimate care of boys and girls can be carried out by a member of the opposite sex with the following provisions:

- When intimate care is being carried out, all children have the right to dignity and privacy (i.e., they should be appropriately covered, the door closed or screens pulled).
- If the child appears distressed or uncomfortable when personal tasks are being carried out, the care should stop immediately. Staff will try and ascertain why the child is distressed and provide reassurance.
- Concerns must be shared with the Safeguarding team.

Communication with children

It is the responsibility of all staff caring for a child to ensure they are aware of the child's methods and level of communication. Children communicate using different methods (e.g., words, signs, symbols, body movements). To ensure effective communication:

- Ascertain how the child communicates (e.g., consult with the child, parent/guardian).
- 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 with individual dignity and respect.

Medical procedures

Children with special needs might require assistance with invasive or non-invasive medical procedures. These procedures will be discussed with parents/guardians, documented on the child's health care plan, and will only be carried out by staff who have been trained to do so. It is particularly important that these staff follow appropriate infection control guidelines and ensure that any medical items are disposed of correctly.

Any members of staff who administer first aid are appropriately training. If an examination of a child is required in an emergency aid situation, it is advisable to have another adult present, with due regard to the child's privacy and dignity.

Physical contact

There may be occasions when a distressed child needs comfort and reassurance that may include physical touch, such as a caring parent would give. Staff must remain aware at all times to ensure that their contact is not threatening or intrusive and not subject to misinterpretation. Judgement will need to take account of the circumstances of the child's distress, their age, the extent and cause of the distress.

This guidance covers a variety of areas relating to the procedures required for toileting and intimate care of children in Northern Schools Trust. However, it must be accepted that there has to be a degree of flexibility and judgement within some situations.

This type of care will always involve some degree of risk; it will not be possible to eliminate all the risks, However, the balance should be on the side of safety.

Every child is entitled to maximum safety, privacy, and respect for dignity.

Appendix 1

Hygiene Room Procedures

- Ensure your hands are washing thoroughly before and after each nappy change. Alcohol gel may be used in addition to but not instead of hand washing.
- Wear gloves whilst changing nappies or toileting children within the hygiene room.
- Change the gloves between each child.
- Decontaminate the changing mat following each use by using the disinfecting wipes. Clean both the mat and any other surrounding environmental surfaces that may have been touched during nappy changing procedures after each and every nappy change.
- Dispose of the nappy into an individual nappy sack and then into the appropriate bin.
- Ensure the changing mat is in a good state of repair to facilitate thorough cleaning. Any damage should be reported immediately.
- Potties and toileting aids should be cleaned and disinfected to minimise the risk of cross-infection, using disinfecting wipes after each use.

Appendix 2

Northern Schools Trust Intimate/Personal Care Plan

Child's name:	Date:
Nominated staff:	
Main areas of need:	
Detailed Plan:	
<p>This plan was written by _____ on _____</p> <p>This plan was agreed with parents/guardians on _____</p> <p>The child's views were sought for this plan on _____</p> <p>(if not, please state why not):</p>	
<p>Signed (Headteacher/SENCO) _____ Date _____</p> <p>Signed (Staff member) _____ Date _____</p> <p>_____ Date _____</p> <p>_____ Date _____</p> <p>_____ Date _____</p> <p>Signed (parent/guardian) _____ Date _____</p>	