

Forres Sandle Manor (EYFS) Policy

Policy Title	Intimate Care
Policy Lead (Appointment (& Initials))	Head of Pre-Prep (TJS)
Date of Last Review	September 2024
Date of Next Review	September 2025

INTIMATE CARE

GENERAL WELFARE REQUIREMENTS

The provider must take the necessary steps to safeguard and promote the welfare of children.

A Unique Child	Positive Relationships	Enabling Environments	Learning and Development
1.3 Keeping safe	2.1 Respecting each other 2.2 Parents as partners	3.4 The wider context	4.4 Personal, social and emotional development

INTIMATE CARE

The pastoral care of our children is central to the aims, ethos and teaching programmes at FSM, and we are committed to developing positive and caring attitudes in our children. Our Intimate Care Policy is part of our collective pastoral care policies. It is our intention to develop independence in each child, however there will be occasions when help is required. The principles and procedures apply to everyone involved in the intimate care of children.

‘Intimate care’ may be defined as an activity required to meet the personal care needs of each individual child in partnership with the parent, carer and the child.

In school this may occur on a regular basis or during a one-off incident.

FSM 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 our children with respect when intimate care is given. No child should be attended to in a way that causes distress or pain and adults and staff must be sensitive to each child’s individual needs.

Intimate care is any care which involves one of the following:

- Assisting a child to change his/her clothes.
- Changing or washing a child who has soiled themselves.
- Assisting with toileting issues.
- Changing nappies.
- Supervising a child involved in managing their own intimate self-care.
- Providing first aid assistance.
- Providing comfort to an upset or distressed child.
- Feeding a child.
- Providing oral care to a child.
- Assisting a child who requires a specific medical procedure and who is not able to carry this out unaided. *

* In the case of a specific procedure only a person suitably trained and assessed as competent should undertake the procedure (e.g. the administration of rectal diazepam). Parents have the responsibility to advise the school of any known intimate care needs relating to their child

PRINCIPLES OF INTIMATE CARE

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

- Every child has a 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 their views taken into account.
- Every child has the right to have levels of intimate care that are appropriate and consistent.

ASSISTING A CHILD TO CHANGE HIS/HER CLOTHES

This is more common in our Foundation Stage. On occasions an individual child may require some assistance with changing if, for example, he/she needs a nappy changing, has an accident at the toilet, gets wet outside, or has vomit on his/her clothes etc.

We will always take the age and development of the children in our care into account. Staff will always encourage children to attempt undressing and dressing unaided if appropriate. However, if assistance is required this will be given.

Staff will always ensure that they have a colleague in the vicinity when supporting dressing/undressing/changing nappies. In the EYFS the toilets open onto the Nursery and

so one member of staff is always able to see what the other is doing and should always be outside the toilet cubicle as far as possible. The child is given privacy by being in a cubicle or further into the room. For younger children, the Nappy changing area is near the toilets in a corner where staff may respect the child's privacy but still be in view of other members of staff.

In Year One and above the child is given the opportunity to change in private, unless the child is in such distress or difficulty that it is not possible to do so. In this case, one member of staff will be in attendance and another informed and in the vicinity. If staff are concerned in any way parents will be sent for and asked to assist their child. They will be informed if the child becomes distressed.

- FSM will have a supply of wipes, clean underwear and spare uniform for this purpose. (A supply of clean underwear and spare uniforms are available from Pre-Prep staff or Matrons). Nursery children are requested to bring in a change of clothes and nappies where appropriate.
- Staff will seek verbal permission for staff to assist in changing the child.
- The member of staff who has assisted a pupil with intimate care will complete the form.
- When nappies are changed this is recorded on the relevant documentation and shared with parents.

CHILD PROTECTION/SAFEGUARDING GUIDELINES

Ensure that the action you are taking is necessary. Get verbal agreement to proceed – CARE – CONCERN – COMMUNICATE.

PASTORAL CARE PROCEDURES

- Ensure the child is happy with who is changing him/her.
- Be responsive to any distress shown.

BASIC HYGIENE ROUTINES

- Always wear protective disposable gloves.
- Seal any soiled clothing in a plastic bag for return to parents or for laundering.

In the case of Foundation Stage children, and in particular a Nursery child, in order to avoid any unnecessary distress, a member of staff may assist the child, with a colleague in attendance, unless a parent has requested otherwise or if the child is reluctant. Parents will be contacted if the child is ill in any way.

PROVIDING COMFORT OR SUPPORT TO A CHILD

There are situations and circumstances where children seek physical comfort from staff (particularly children in Early Years). Where this happens staff need to be aware that any physical contact must be kept to a minimum. When comforting a child or giving reassurance, staff must ensure that at no time can the act be considered intimate. If

physical contact is deemed to be appropriate, staff must provide care which is professionally appropriate to the age and context.

If a child touches a member of staff in a way that makes him/her feel uncomfortable this can be gently but firmly discouraged in a way which communicates that it is the touch, rather than the child, which is unacceptable. If a child touches a member of staff, as noted above, this should be discussed, in confidence with the Designated Safeguarding Lead (DSL) or their Deputies.

Assisting a child who requires a specific medical procedure and who is not able to carry this out unaided: Our Health and Welfare Policy outlines arrangements for the management of the majority of medications in school.

Parental permission must be given before any medication is dispensed in school. A small number of children will have significant medical needs and in addition to the arrangements included in our Administration of Medications Policy will have an Individual 'Care Plan.' This Care Plan will be formulated by the relevant medical body. If required, school staff will receive appropriate training.

SWIMMING

All our pupils participate in a swimming programme. Children are entitled to respect and privacy when changing their clothes and the older children have separate changing rooms for this purpose. However, there must be the required level of supervision to safeguard young people with regard to health and safety considerations and to ensure that bullying, teasing or other unacceptable behaviour does not occur. EYFS children dress and undress in their classrooms under the supervision of two members of staff. On occasions, such as Swimming Club, parents will be asked to wait outside the classroom for their children to be passed to them.

TRIPS

Educational Trips are an important part of our school experience. Particular care is required when supervising pupils in this less formal setting.

Staff are still guided by our Safeguarding and Child Protection procedures and the staff Code of Conduct. Some specific Intimate Care issues may arise away from school. Spare clothes, gloves, bags etc. are taken on school trips.

SCHOOL RESPONSIBILITIES

All members of staff working with children are will have a DBS certificate and will be trained in Paediatric First Aid.

Where anticipated, intimate care arrangements are agreed between the school and parents and, when appropriate and possible, by the child. Consent forms are signed by the parent and stored in the child's file. **Only in an emergency would staff undertake**

any aspect of intimate care that has not been agreed by parents and school. Parents would then be contacted immediately. The views of all relevant parties should be sought and considered to inform future arrangements. If a staff member has concerns about a colleague's intimate care practice he or she must report this to the DSL or their Deputies.

GUIDELINES FOR GOOD PRACTICE

All children, no matter their age or stage of development, 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.

Very 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.

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. Adhering to the following guidelines of good practice should safeguard both children and staff.

- Involve the child in the intimate care. Try to encourage a child's independence as far as possible in his or her intimate care. Where a situation renders a child fully dependent, talk about what is going to be done and, where possible, give choices. Check your practice by asking the child or parent about any preferences while carrying out the intimate care.
- Treat every child with dignity and respect and ensure privacy appropriate to the child's age and situation. Care should not be carried out by a member of staff working alone with a child.
- Make sure practice in intimate care is consistent. In the EYFS, wherever possible, Intimate Care should only be given by the child's Key Worker. However, as a child may have multiple carers, a consistent approach to care is essential. Effective communication between all parties ensures that practice is consistent.
- Be aware of your own limitations. Only carry out activities you understand and feel competent with. If in doubt, 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 bodies belong to them are less vulnerable to sexual abuse. The approach you take to intimate care can convey lots of messages to a child about their body worth. Your attitude to a child's intimate care is important. Keeping in mind the child's age, routine care can be both efficient and relaxed.
- If you have any concerns you must report them. If you observe any unusual markings, discolouration or swelling report it immediately to the DSL.

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

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.

WORKING WITH CHILDREN OF THE OPPOSITE SEX

There is positive value in both male and female staff being involved with children. Ideally, every child should have the 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 staff of the opposite sex with the following provisions:

- When intimate care is being carried out, all children have the right to dignity and privacy. If the child appears distressed or uncomfortable when personal tasks are being carried out, the care should stop immediately. Try to ascertain why the child is distressed and provide reassurance.
- Report any concerns to the DSL and make a written record.
- Parents must be informed about any concerns.

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. To ensure effective communication:

- 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.

Parental Permission for Intimate Care

Dear Parents,

From time to time, as you are aware, due to toileting accidents, sickness, becoming wet due to weather etc., it may become necessary for your child's clothing to be changed.

The following principles underpin our policy and practice for intimate care:

- Every child has a 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 their views taken into account; and
- Every child has the right to have levels of intimate care that are appropriate and consistent.

Please could you sign and date the permission slip below

Yours Sincerely

Tracy Spottiswood

Should it be necessary, I give permission for _____ to receive intimate care (e.g. help with changing or following toileting).

I understand that staff will endeavour to encourage my child to be independent.

I understand that I will be informed discretely should the occasion arise.

Signed: _____ date: _____

Adult with parental responsibility for: _____

Intimate Care Form

Name of Child:.....

Date:.....

Circumstance in which Intimate Care was deemed necessary:

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.....

Child's consent obtained (Please circle): Yes No

If no give reasons:.....

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Action taken:.....

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Intimate care given by:.....

Additional adult in attendance/vicinity:.....