



Lee Brigg Infant and Nursery School Intimate Care Policy

Date	Review Date	Lead	Nominated Governor
April 2023	April 2025	L Kilkenny	N Godfrey

Lee Brigg Infant and Nursery 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. We recognise that there is a need to treat all our children with respect when intimate care is given. Staff must be sensitive to each child's individual needs.

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

- 1. Assisting a child to change their clothes
- 2. Changing or washing a child who has soiled/wet themselves
- 3. Assisting a child to apply sun cream
- 4. Providing first aid assistance
- 5. Providing comfort to an upset or distressed child
- 6. 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. Parents/Carers have the responsibility to advise the school of any known intimate care needs relating to their child. Those children with an identified need for **daily** intimate care will have an individual care plan in place which has been agreed and signed by Parents/Carers.

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 the Foundation Stage. On occasions, an individual child may require some assistance with changing if, for example, they have had an accident at the toilet, got wet outside, or has vomited on their clothes. Staff will always encourage children to attempt undressing and dressing unaided. However, ifassistance is required this will be given.

Staff will always ensure that a colleague has been alerted, when supporting dressing/undressing and will always give the child the opportunity to change in private, unless the child is in such distress that it is not possible to do so. If staff are concerned in any way Parents/Carers will be contacted.

Changing a child who has soiled/wet themselves

If a child soils/wets themselves whilst in school, a professional judgement has to be made whether it is appropriate to change the child in school, or request the Parent/Carer to collect the child for changing.

In either circumstance the child's needs are paramount and they should be comforted and reassured throughout. The following guidelines outline our procedures, but we will also seek to make age-appropriate responses.

- The child will be given the opportunity to change underwear in private and carry out this process themselves.
- School will have a supply of wipes, clean underwear and spare uniform for this purpose.
- If a child is not able to complete this task unaided, assistance will be given. Staff will always ensure that they have made a colleague aware when supporting dressing/undressing and will always give the child the opportunity to change in private, unless the child is in such distress that it is not possible to do so.

For pupil well-being or if a child becomes distressed, a Parent/Carer may be needed, and will be asked to assist their child in school.

- If the Parent/Carer is unable to come to school within an appropriate time frame, the child will be accompanied and supported by a staff member until they arrive. This avoids any further distress and preserves dignity.
- The member of staff who has assisted a pupil with intimate care will complete the appropriate record which Parents/Carers will then be asked to sign.

When changing a child who has wet/soiled themselves, staff must:

- Ensure that the action they are taking is necessary (Where possible the child should do things for themselves).
- Ensure the child is happy with who is assisting them.
- Communicate with the child in a calm manner.
- · Be responsive to any distress shown.
- Always wear protective disposable gloves.
- Seal any soiled clothing in a plastic bag for return to Parents/Carers

Assisting a child to apply sun cream

Parents/Carers will be advised to apply sun cream to their child before they come to school if the weather is particularly hot. During the school day it may be necessary for sun cream to be reapplied. Children should bring sun cream in a named bottle. The sharing of sun cream between children is not permitted. If a child has not brought sun cream and they require sun cream applying, a phone call will be made to Parents/Carers. Children will be encouraged to bring 'spray' sun cream as the application of this can be easily supported by an adult. The staff member can spray the cream onto the child's arms/hands without unnecessary physical contact and allow them to apply it to themselves. Time will be given in class before playtimes/lunchtimes for the application of sun cream so that children can be advised and given the time to apply it. Where possible in the case of extreme hot weather, children will be encouraged to access shade or brought into school out of the direct sun.

Providing first aid assistance

Providing first aid to children is a daily occurrence and often requires physical contact or intimate care. If this is necessary the staff member carrying out the first aid should ask permission from the child, e.g. Can I look at your leg? Can I feel your head? They should talk to the child about what they are doing, e.g. I am just going to wipe your knee. If removal of clothing is required to check an injury, permission from the child should be sought and a second colleague must be informed. All care provided will be recorded in the accident book.

In the case of more significant injuries children should **not** be lifted up or moved unless deemed absolutely necessary by a more qualified Paediatric First Aider, in order to prevent them from coming to any other significant harm. If a child is not able to get up to a standing position themselves then a first aid trained member of staff must attend to them until a time when they can get up, or a time when it is deemed necessary to call an ambulance.

Providing comfort to an upset or distressed child:

There are situations and circumstances where children seek physical comfort from staff. Where this happens, staff need to be aware that any physical contact must be kept to a minimum. If physical contact is deemed to be appropriate, staff must provide care which is professionally appropriate to the age and context.

Assisting a child who requires a specific medical procedure and who is not able to carry this out unaided.

Our Administration of Medications Policy outlines arrangements for the management of the majority of medications in school. Parental permission must be given before any medication is dispensed within 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.

Guidelines For Good Practice

All children 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. 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.

LEE BRIGG INFANT AND NURSERY SCHOOL INTIMATE CARE POLICY

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.
- Make sure practice in intimate care is consistent. 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 a Designated Safeguarding Lead.
- 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 a Designated Safeguarding Lead.
- · Report and record any unusual emotional or behavioural responses by the child