**HIPPINGS METHODIST PRIMARY SCHOOL**

**Intimate and Personal Care Policy**

‘As a family we do our best with God in our hearts’

I can do all things through Christ who strengthens me: Philippians 4 verse 13

**Our loving school endeavours to provide the best possible all-round education in a Christian setting. We will be a family that does our best with God in our hearts understanding that we are all His children. We aim for all within our school to develop spiritually, morally, academically and culturally.**

The pastoral care of our children is central to the aims, ethos and teaching programmes in Hippings Methodist Primary School and we are committed to developing positive and caring attitudes in our children. 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 and personal 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.

Hippings Methodist Primary School is committed to ensuring that all staff responsible for the intimate and personal 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 and personal 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.

**At Hippings Methodist Primary School it is expected that all children entering Reception Class will be fully toilet trained(unless there is a diagnosed medical need that prevents this). However, we do expect the occasional accident especially from children in our Foundation and Key Stage 1 departments.**

**Intimate and personal care is any care which involves one of the following:**

1. Assisting a child to change his/her clothes

2. Changing or washing a child who has soiled him / herself

3. Assisting with toileting issues

4. Supervising a child involved in intimate self-care

5. Providing first aid assistance

6. Providing comfort to an upset or distressed child

7. Feeding a child

8. Providing oral care to a child

9. 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 an epi-pen or specific epilepsy medications) Parents have the responsibility to advise the school of any known intimate and personal care needs relating to their child.

**Principles of Intimate and Personal Care**

The following are the fundamental principles of intimate and personal 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 has an accident at the toilet, gets wet outside, or has vomit on his / her clothes etc.

Staff will always encourage children to attempt undressing and dressing unaided. However, if assistance is required this will be given.

Staff will always ensure that they have a colleague in attendance 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 will be sent for and asked to assist their child and informed if the child becomes distressed.

**Changing a child who has soiled him/herself:**

If a child soils him/herself 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 he/she 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 his / her underwear in private and carry out this process themselves.
* School will have a supply of clean underwear and spare uniform for this purpose. (It may be necessary to ask parents to provide spare uniform if this is a regular occurrence).
* If a child is not able to complete this task unaided, school staff will attempt to contact the emergency contact to inform them of the situation. The emergency contact will need to come to school and the child may need to be taken home to be washed and changed.
* If none of the contacts can be reached the Head Teacher is to be consulted and the decision taken on the basis of loco-parentis and our duty of care to meet the needs of the child.
* The member of Staff who has assisted a pupil with intimate and personal care will record this on CPOMs.

**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.

 In the case of Foundation Stage children, 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 as soon as it is practical to do so.

 **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 the touch, rather than the child, is unacceptable. If a child touches a member of staff, as noted above, this should be discussed, in confidence with the Designated Teacher for Child Protection(DSL).

 **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.

Written parental permission must be given before any medication is dispensed in school- this form is available from the school office.

 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**

Our Year 4 and 5 classes and some Year 6 children participate in a swimming programme at Accrington Academy. Children are entitled to respect and privacy when changing their clothes 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.

Accrington Academy changing facilities are organised in a single sex group changing basis. Where a child needs additional support for changing parental permission will be sought and a personal care plan will be drawn up so as to maintain dignity but increase independence.

 **Residential Trips**

Residential educational visits are an important part of our Year 6 school experience. Particular care is required when supervising pupils in this less formal setting.

As with Extra-Curricular Activities, staff are still guided by our Safeguarding, Child Protection procedures and Positive Behaviour Policy.

Some specific Intimate Care issues may arise in a Residential context:

 Showering

Children are entitled to respect and privacy when changing their clothes or taking a shower. 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.

This means that staff should announce their intention of entering bedrooms and changing rooms, avoid remaining in these rooms unless pupil needs require it, avoid any physical contact when children are in a state of undress and avoid any visually intrusive behaviour.

Given the vulnerabilities of the situation, it is strongly recommended that when supervising children in a state of undress, another member of staff is present. However, this may not always be possible and therefore Staff need to be vigilant about their own conduct, e.g. adults must not change in the same place as children or shower with children.

It is best practice in our school that when an incident has taken place that has necessitated a member of staff to be present when children are changing that an incident report is made on CPOMs.

Night Time Routines

It is established practice that the children’s bedrooms are private spaces and anyone else wanting to enter the room should knock and announce their intention to enter.

At bedtime, children are given a set amount of time to change and prepare for bed and will be told when the supervising teachers will visit the rooms to check all is okay and switch off the lights. A reciprocal arrangement is in place in the mornings.

There are occasions when incidents take place during the night and the need arises to:

1. Assist a child to change his / her clothes

2. Change a child who has soiled him / herself

3. Provide comfort to an upset or distressed child

4. Assist a child who requires a specific medical procedure and who is not able to carry this out unaided. Guidance as above will be followed with the support of an additional member of staff in attendance.

**School Responsibilities :**

All members of staff working with children are vetted by the Education Authority and require DBS checks. This includes students on work placement and volunteers who may be left alone with children. Vetting includes criminal record checks and two references. Procedures are followed under Safer Recruitment.

Only those members of staff who are familiar with the intimate and Personal Care policy and other Care Policies of the school are involved in the intimate care of children.

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 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 Designated Teacher for Child Protection.(DSL)

**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.

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.

1. 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.

2. 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.

 3. 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.

4. 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.

5. 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.

6. If you have any concerns you must report them. If you observe any unusual markings, discolouration or swelling report it immediately to the Designated Teacher for Child Protection.

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 designated teacher(DSL) Report and record any unusual emotional or behavioural response by the child on CPOMS. A written record of concerns must be made available to parents.

**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.

Written by: T J Westwell

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 **Hippings Methodist Primary School**

**Parental permission for Intimate Care**

Should it be necessary, I give permission for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to receive intimate and personal 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.

I understand that, if the school requests it, I may need to come to school in order to clean my child.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Adult with parental responsibility for: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_