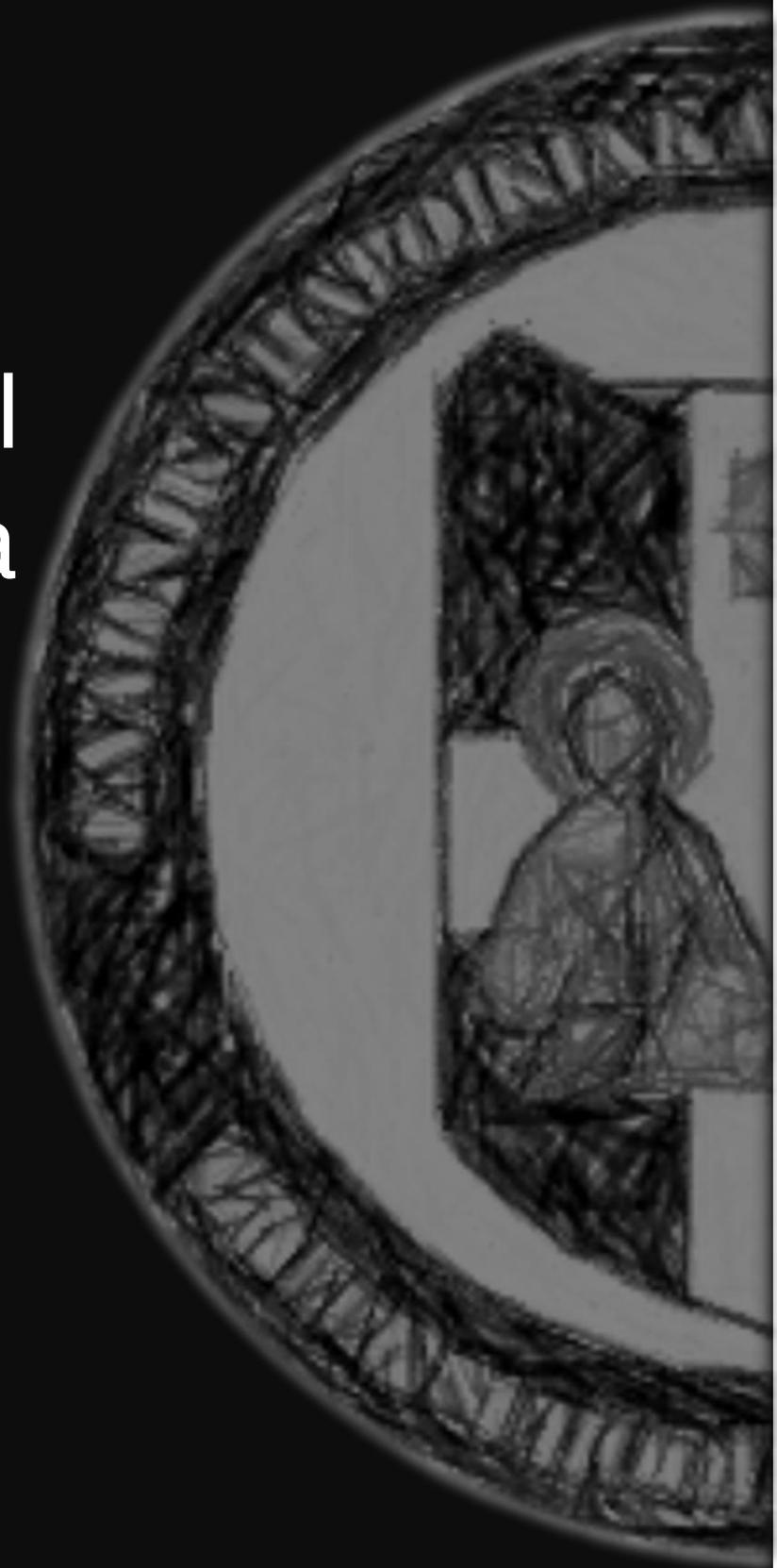


Greek School  
*of* Ayia Triada  
Birmingham

Intimate  
Care Policy



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## A. Introduction

This Policy and Guidelines have been developed to safeguard children and staff involved with intimate care. The Management Board of the Greek School of Ayia Triada [GSAT] will act in accordance with Section 175 of the Education Act 2002 and 'Safeguarding Children and Safer Recruitment in Education' (DCSF 2010) to safeguard and promote the welfare of pupils at GSAT.

- (i) The GSAT takes seriously its responsibility to safeguard and promote the welfare of the children and young people in its care. Meeting a pupil's intimate care needs is one aspect of safeguarding and it is important that all members of GSAT's staff is complying with this policy.
- (ii) GSAT 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. It is acknowledged that these adults are in a position of great trust. GSAT recognises that there is a need to treat all children, whatever their age, gender, disability, religion or ethnicity, with respect when intimate care is given.
- (iii) The child's welfare and dignity is of paramount importance. No child should be attended to in a way that causes distress or pain.
- (iv) Staff will work in close partnership with parent/carers to share information and provide continuity of care.
- (v) The Management Board also recognises its duties and responsibilities in relation to the Disability Discrimination Act which requires that any child with an impairment that affects his/her ability to carry out day-to-day activities must not be discriminated and is to be read in conjunction with the following policies of our school:
  - GSAT Safeguarding policy
  - Health and safety policy and procedures
  - Collective Safeguarding Procedures\_
  - Special Educational Needs policy
- (vi) They apply to everyone involved in the intimate care of children in our school. The purpose of this policy is:
  - To safeguard the rights and promote the best interests of the children;
  - To ensure children are treated with sensitivity and respect, and in such a way
  - that their experience of intimate care is a positive one;
  - To safeguard adults required to operate in sensitive situations;

- To raise awareness and provide a clear procedure for intimate care;
- To inform parents/carers in how intimate care is administered;
- To ensure parents/carers are consulted in the intimate care of their children.

## **B. Definition**

Intimate care may be defined as any activity required to meet the personal care needs of each individual child. Parents have the responsibility to advise staff of any intimate care needs of their child, and staff have a responsibility to work in partnership with children and parents.

Intimate care can include:

- Feeding;
- Oral care;
- Washing;
- Dressing/undressing - Supporting a pupil with dressing/undressing;
- Toileting - Assisting a pupil who has soiled him/herself, has vomited or feels unwell;
- Menstrual care - Providing advice to enable a pupil to attend to their own needs;
- Supervision of a child involved in intimate self-care.
- Providing comfort or support for a distressed pupil and assisting a pupil requiring medical care, who is not able to carry this out unaided are also considered as intimate care.

## **C. Principles of Intimate Care**

The following are the fundamental principles upon which the policy is based:

- 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 have levels of intimate care that are as consistent
- as possible.

## **D. Responsibilities of Staff involved with intimate care**

- At GSAT all staff are DBS checked on application. Therefore, all individuals who provide intimate care will have been vetted correctly;
- The Headteacher /Designated teacher for child protection must ensure that all
- staff undertaking the intimate care of children are familiar with, and Understand the Intimate Care Policy and Guidelines. Staff should also be aware that this policy and guidelines have been developed in conjunction with associated Policy and Procedures for safeguarding, child protection, special educational needs.
- All staff must have an awareness of the specific types of intimate care that
- they carry out and fully understand the Intimate Care Policy and Guidelines within the context of their work;
- Intimate care arrangements must be agreed by the school, parents/guardian and child (if appropriate) through the distribution of the school policy and by the parents signing a written consent form (if their child is in Nursery and Reception of GSAT);
- Signed consent forms will be kept in a class file. If a parent/guardian does not return a signed consent form or requires alternative arrangements made for their child then this will also be recorded in the class file;
- If a staff member has concerns about an intimate care practice, they must report this to their Designated Child Protection Officer or any of the Designated Child Protection Leads in the Management Board.

## **E. Intimate Care Arrangements**

### **1. Supporting dressing/undressing**

Sometimes it will be necessary for staff to aid a child in getting dressed or undressed particularly in Nursery and Reception and in some cases in Year 1.

Staff will always encourage children to attempt undressing and dressing unaided.

## **2. Providing comfort or support**

Children may seek physical comfort from staff particularly in Nursery and Reception. Where children require physical support, staff need to be aware that physical contact must be kept to a minimum and be child initiated. When comforting a child or giving reassurance, the member of staff's hands should always be seen and a child should not be positioned close to a member of staff's body which could be regarded as intimate.

If physical contact is deemed to be appropriate staff must provide care which is suitable to the age, gender and situation of the child.

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.

## **3. Medical Procedures**

It is preferable that medication is administered at home before or after school. If it is necessary for a child to receive medicine during the school day parents/guardians must fill out a permission form from the school office and discuss their child's needs with a member of staff before the school agrees to administer medicines or medical care. Parents and carers should be made aware that staff administration of medicines is voluntary. Any member of staff giving medicine to a pupil should check:

- The pupil's name;
- Prescribed dose;
- Expiry date;
- Written instructions provided by parents or doctor;
- Complete a school drugs administration form and have it counter signed, when possible, by another member of staff.

Particular attention should be paid to the safe storage, handling and disposal of medicines. The Headteacher/Member of Management Board with Medical Background has prime responsibility for the safe management of medicines kept at school. Medicines should be kept in a place not accessible to pupils. Arrangements must be in place to ensure that any medication that a pupil might need in an emergency is readily available to them.

#### 4. Medical Conditions

If a child has a medical condition which is likely to lead to soiling and subsequent staff intervention, specific medical advice may be sought from outside agencies and the parents will be asked to sign a permission form so that staff can clean and change their child if necessary.

If a parent does not give consent, the school will contact the parents or other emergency contact giving specific details about the necessity for cleaning the child. If the parents or emergency contact are able to come promptly, the child is comforted and kept away from the other children to preserve dignity until the parent arrives. If parents/guardians cannot be contacted - staff will decide on the most appropriate care to minimise any stress, discomfort or anxiety the child may be experiencing.

#### 5. Soiling

Staff from GSAT nursery and reception will work together in partnership with parents to support each child towards independent use of the toilet, for children who are not yet independently toileting. Although our school receives children who usually are fully toilet trained (aged 3.5 yrs old+), however there are cases of children who are not trained fully or other cases of children with medical or other needs which might extent to independent toilet needs

If tending to a child who has soiled themselves during the school day staff will respond sensitively and professionally. If 'accidents' occur the child will change themselves into dry clothing, and wet items will be sent home for washing. The child's independence will be encouraged as far as possible in his/her intimate care and reassurance given. A record of the incident will be kept in school and the parent will be informed (by a note home, verbally at home collection time or phone call) and requested to return the borrowed items of clothing when laundered.

If there is an occurrence of heavier soiling or vomiting, this may require staff to provide care at a more personal level. Staff will follow set procedures for this intimate care:

- If possible, the child will be removed to a less public place to maintain dignity and avoid a feeling of humiliation;
- If appropriate, the child will be encouraged, through guidance and assistance, to clean themselves to make them more comfortable.
- Parents should be contacted as soon as possible;

Staff will provide further intimate care in the following situations

1. If parents/guardians cannot be contacted - **staff will decide on the most appropriate care to minimise any stress, discomfort or anxiety the child may be experiencing.**
2. If the parents/guardians are unable to come to school.
3. If the child is very distressed or suffering unduly.

4. Intimate care will only be provided to older children in extreme circumstances. It is anticipated that older children will be able to manage any circumstances given guidance or assistance.

If staff are providing intimate care **two members of staff will be in the vicinity** at all times e.g. the second staff member could be in the adjacent room with the adjoining door open.

If incidents of soiling is a regular occurrence then a pupil care plan will need to be put in place after consultation between the school, the pupils' parent's/guardians and if appropriate, other outside agencies.

***Please note: The well being and dignity of the child will remain paramount at all times during any incident requiring intimate care.***

## **6. Hygiene**

All staff must be familiar with normal precautions for avoiding infection. They must follow basic hygiene procedures and have access to protective, disposable gloves.

## **7. Protection for staff**

Members of staff need to be aware of the potential danger of allegations being made against them and take precautions to avoid this risk.

These should include:

- If staff are providing intimate care two members of staff will be in the vicinity at all times e.g. the second staff member could be in the adjacent room with the adjoining door open.
- Gaining a verbal agreement from another member of staff that the action is being taken is necessary.
- Allow the child, wherever possible, to give verbal consent to the person assisting them.
- Allow the child a choice in the sequence of care.
- Be aware of and responsive to the child's reactions

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

- 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 dependant talk to them about what is going to be done and give them choice where possible.
- 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.
- Be aware of own limitations. Only carry out care activities you understand and feel competent and confident to carry out. If in doubt ask.
- Promote positive self-esteem and body image. Confident, self-assured children who feel their body belongs to them are less vulnerable to sexual abuse.
- If you have any concerns you must report them.
- It is important to follow the school's reporting and recording procedures.
- Parents/guardians must be informed about concerns.

### **Consents**

GSAT aims at receiving consents from parents for children at the nursery and reception

A signed consent needs to be emailed and sent in paper to school (Appendix: Intimate care consent form)

### **Monitoring and Evaluation**

This policy will be reviewed every 2 years or earlier if necessary.

### **For further information please refer to:**

#### **Reviewing**

The efficacy of this policy will be reviewed every two years by the governing body- The Greek School of Ayia Triada Management Board. If the school decides to change the way in which it uses CCTV, it will inform the Information Commissioner within 28 days.

# Greek School of Ayia Triada Birmingham

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## INTIMATE CARE PARENTAL CONSENT

<b>Pupil's Personal Details</b>	
Full Name:	
Date of Birth:	Parent/Carer name:
Address:	
A. My child has a diagnosed medical condition: YES NO	
If yes please provide details [attach recent medical report/GPs letter]	
B. My child needs help with toileting: YES NO	
If yes please provide details	
Add any information you consider necessary:	

I/We give permission for school to provide intimate care to my/our child.

I/We will advise the school of anything that may affect issues of personal care (if medication is changed or my child has an infection for example)

I/We understand the procedures that will be carried out and will contact the school immediately if there are any concerns.

**Signature:**

**Printed Name:**

**Relationship to child:**

**Date:**.....

