



Portland Spencer Academy

Intimate & Invasive Care Policy

The Local Governing Body of Portland Spencer Academy adopted this policy statement in September 2021

It will be reviewed no later than September 2022



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Introduction

Portland Spencer Academy is a mainstream setting. We have nursery and breakfast club provision. We are part of the Spencer Academies Trust.

The Spencer Academies Trust has delegated Full responsibility to the Local Governing Body (LGB) of Portland School for this Policy. It is the LGB's responsibility to ensure this Policy is implemented and reviewed in accordance with statutory and legislative arrangements.

The Spencer Academies Trust may, on an annual, basis undertake audits to confirm that appropriate arrangements are maintained by the Academy.

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Review date: September 2022

This policy should be read in conjunction with Administration of medicines and Medical Condition Policy.

1. Intimate and Invasive Care

Portland Spencer Academy 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 and dignity when intimate care is given. No child should be attended to in a way that causes distress, embarrassment or pain.

Children's dignity will be preserved and a high level of privacy, choice and control will be provided to them. Staff that provide intimate care to children have a high awareness of child protection issues. Staff will work in partnership with parents/carers to provide continuity of care.

2. Definition



Intimate care is any care which involves washing, touching or carrying out an invasive procedure to intimate personal areas. In most cases such care will involve procedures to do with personal hygiene and the cleaning of associated equipment as part of the staff member's duty of care. In the case of specific procedures only the staff suitably trained and assessed as competent should undertake the procedure (e.g. the administration of rectal diazepam).

3. Our Approach to Best Practice

Portland Spencer Academy 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. The management of all children with intimate care needs will be carefully planned. The child who requires intimate care is treated with respect at all times; the child's welfare and dignity is of paramount importance.

Staff who provide intimate care are trained to do so (including Child Protection and Health and Safety training in lifting and moving) and are fully aware of best practice. Apparatus will be provided to assist with children who need special arrangements following assessment from physiotherapist/ occupational therapist as required.

Staff will be supported to adapt their practice in relation to the needs of individual children taking into account developmental changes such as the possible onset of puberty and menstruation. Wherever possible staff who are involved in the intimate care of children will not usually be involved with the delivery of sex education to the children in their care as an additional safeguard to both staff and children involved.

In relation to the 'Keeping Children Safe in Education' statutory guidance, Portland Spencer Academy ensures all staff sign and agree to the school's code of conduct (staff behaviour policy) in order to safeguard and promote children's welfare.

The child will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each child to do as much for him/ herself as he/she can. This may mean, for example, giving the child responsibility for washing or wiping themselves.

Individual health care plans will be drawn up for children who are given planned daily care, as appropriate to suit the circumstances of the child.

Each child's right to privacy will be respected. Careful consideration will be given to each child's situation to determine how many carers might need to be present when a child is toileted.

Wherever possible the child should be cared for by an adult of the same sex. However, in certain circumstances this principle may need to be waived where the failure to provide appropriate care would result in negligence for example, female staff supporting boys in our school, as no male staff are available. Wherever possible the child will be cared for by one adult unless there is a sound reason for having more adults present. If this is the case, the reasons should be clearly documented.

Wherever possible the same child will not be cared for by the same adult on a regular basis; ideally there will be a rota of carers known to the child who will take turns in providing care. This will ensure, as far as possible, that over-familiar relationships are discouraged from developing.

Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the child's health care plan. The needs and wishes of children and parents will be taken into account wherever possible within the constraints of staffing and equal opportunities legislation.



4. The Protection of Children

Education Child Protection Procedures and Inter-Agency/ Multi-Agency Child Protection procedures will be adhered to.

All children will be taught personal safety skills carefully matched to their level of development and understanding.

If a member of staff has any concerns about physical changes in a child's presentation, e.g. marks, bruises, soreness etc. s/he will immediately report concerns to the appropriate manager/ designated person for child protection.

If a child becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be looked into and outcomes recorded. Parents/carers will be contacted at the earliest opportunity as part of this process in order to reach a resolution. Staffing schedules will be altered until the issue(s) are resolved so that the child's needs remain paramount. Further advice will be taken from outside agencies if necessary. Should a child continue to become distressed when being cared for by staff members, we will have no alternative but to call parents to change their child to ensure we do not negatively impact the child's wellbeing.

If a child makes an allegation against a member of staff, all necessary procedures will be followed (see Safeguarding and Child Protection Policy)

5. Concerns

If, during the intimate care of a child you accidentally hurt them, or if the child seems unusually sore or tender in the genital area, or appears to be sexually aroused by your actions, or misunderstands or misinterprets something, or has a very emotional reaction without apparent cause – let your immediate line manager know about any such incident as soon as possible and complete an incident log sheet and /or safeguarding concern form. Some of these could be cause for concern about the child, or alternatively the child or the parent might possibly misconstrue something you have done.

6. Health and Safety

When changing a child, the member of staff must always wear protective gloves and a plastic apron. The member of staff must change the child's pad at the frequency requested by the parent/carer in conjunction with consultation with other professionals at review meetings. Parent must provide pads and wipes.

After giving care, take off the gloves, pulling from the wrists and turn inside out as they come away from the hand. Dispose of in the bin. Wash hands.

Always use clean protective clothing for each child.

With invasive care (nasal gastric tubes, Mickey buttons and feed pumps) minimal staff should be used. All staff must be trained. When the alarm goes off at the end of a feed, it should be responded to straight away. Do not draw attention to the child.

Lone working – tell another staff member where you are, who you are with and when you are doing something. This is for your own protection. If you feel vulnerable, have another member of staff with you.



Staff should follow a health care plan for children who have Mickey buttons; nasal gastric tube feed pumps, stomas, insulin injections, blood sugar testing equipment, suctioning or buccal medazolan. Only trained staff, who hold a current competence certificate, are able to carry out any of these procedures.

7. Nappy/Pull ups/Pants Changing & Toilet Training

Portland Spencer Academy intends not to deprive any child starting Foundation at the correct time due to them still wearing nappies/pull-ups.

Portland Spencer Academy intends to change nappies if staffing levels allow to ensure that no child is left feeling uncomfortable.

We aim to inform all new parents that the Foundation Unit will come to an arrangement with them to allow their child to start Portland Spencer Academy in nappies/pull ups, also work together with parents to aid in toilet training when the child is ready. We will also aim to change children when required to maintain their comfort but only when staffing levels allow.

We would encourage parents to continue to encourage their child to be toilet trained at school as soon as possible when they are ready for this stage in their development. Children who frequently soil and wet and who have no underlying additional need cannot be regularly changed at school. In this case we will have no alternative but to call parents to change their child.

8. Methods

- Parents are required to sign a permission form so that staff members can change nappies /pull ups/pants during session time (when staffing levels allow).
- All nappy /pull ups/pants changes are recorded with date, time and staff name in the Changing book.
- If a parent does not sign the permission form, then parents will always be contacted so that they can come and change their child.
- All nappies are disposed of hygienically. Wet/soiled clothing will be returned double bagged to parents for laundering. Parents should send in some suitable bags for school to use. If school items are supplied, please return so they can be used again.
- Lone working – tell another staff member where you are, who you are with and when you are doing something. This is for your own protection. If you feel vulnerable, have another member of staff with you. It is acceptable to keep the door open but care should be taken to preserve the child's dignity as far as possible. Standing changes could then take place using the curtain as a screen.
- Put disposable Gloves on
- Change soiled or wet nappy/pants /pull ups
- Clean child with supplied wipes; Wipes and disposable gloves must go in nappy bag with soiled nappy. (children who are not soiled do not usually need a wipe)
- In the event a bed was to be used. Spray bed.
- Wash hands and record in changing book. Children to also wash hands, especially if involved in the changing.
- Remind child at regular intervals to use the toilet, when the child does go give lots of encouragement and praise. After child has used toilet encourage them to wash hands.



- If a child has a toilet accident deal with it without any fuss, and in private, getting child into clean clothes as soon as possible. Do not make the child feel bad or embarrassed about the accident by showing your disapproval.
- An older child will be encouraged to carry out as much of the changing process as they can manage. Eg removing wet nappy/pull ups/pants etc to minimise the amount of care given by the adult. Assistance will be given as required. Children to wash hands afterwards.

9. Equipment Provision

Parents have a role to play when their child is still wearing nappies. The parent should provide nappies, disposal bags, wipes, etc. and parents should be made aware of this responsibility. Schools are responsible for providing gloves, plastic aprons, a bin and liners to dispose of any waste.



Appendix 1: Permission to change letter

Permission to change nappies, pants etc in school

I give permission for my child _____ to be changed at school (when staffing levels allow) according to the school policy on 'Intimate and Invasive Care' and 'Nappy/Pull ups/Pants changing'

A copy of the second policy is attached to this letter for your information.

I understand that I am responsible for supplying baby wipes, pull ups, nappies, bags, dry pants and clothes as necessary for my child according to their need.

I understand that the adult changing my child will at all times ensure the safety and dignity of my child.

I understand that all changing is done in accordance with guidelines on safeguarding and child protection procedures (see policy)

If my child has no underlying additional need I understand that **I am expected to work with school and my health visitor to support my child in becoming reliably clean and dry as soon as possible.**

Date:

Child's Name:

Signed:

Relationship to Child:

*Please note, if you do not sign and return this form we will not be able to change your child even if staffing levels allow.



