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**Intimate Care Policy**

At Highters Heath Nursery School we aim to provide a friendly, secure and stimulating environment where children and families from all backgrounds and cultures feel welcomed. We respect and value each other, encouraging and supporting our children to be confident and independent individuals who achieve their best.

**This policy should be read in conjunction with our separate Child Protection Policy.**

**INTRODUCTION**

Nursery School considers the personal, social and emotional well being of our children paramount. Our Intimate care policy reflects the aim to treat children with sensitivity and respect.

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

In most cases such care will involve cleaning for hygiene purposes as part of a staff member’s duty of care. In the case of a specific procedure only a person suitably trained and assessed as competent should undertake the procedure.

Children's dignity will be preserved and a high level of privacy, choice and control will be provided to them. Staff who provide intimate care to children have a high awareness of child protection issues. Intimate care can provide opportunities to teach children to value their own bodies, have a positive body image, to develop their safety skills and to enhance their self esteem. Staff behaviour is open to scrutiny and staff at Highters Heath Nursery School work in partnership with parents/carers to provide continuity of care to children wherever possible.

The issue of intimate care is a sensitive one and will require staff to be respectful of the child’s needs. The child's dignity should always be preserved with a high level of privacy, choice and control. There shall be a high awareness of child protection issues.

We are 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 when intimate care is given. No child should be attended to in a way that causes distress or pain.

Intimate care can be defined as care tasks of an intimate nature. This includes:

* Supporting a child with dressing and undressing
* Providing comfort or support for a distressed child
* Assisting a child requiring medical care, who is not able to carry this out unaided
* Changing nappies or cleaning a child who has soiled him/herself, has vomited or feels unwell

**Supporting dressing and undressing**

Sometimes it will be necessary for staff to aid a child in getting dressed or undressed. Staff will always encourage children to attempt dressing and undressing unaided.

**Providing comfort or support**

Children may seek physical comfort from staff. Where children require physical support, staff need to be aware that physical contact must be kept appropriate and be child initiated. If physical contact is deemed to be appropriate, staff must provide care which is suitable to the age, gender age 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.

**Medical procedures (See Procedure for Administration of Medicines)**

If it is necessary for a child to receive medicine during the school day parents must fill out a permission form which is signed by the member of staff administering the medication and witnessed by a second member of staff. Parents must then sign this form when they collect their child.

**Soiling**

All children who require intimate care are treated respectfully at all times; the child's welfare and dignity is of paramount importance.

Wherever possible it will be a child’s identified key person that provides intimate care. This key

person is to make it known to another member of staff working close by that such care is being

provided in order to ensure reasonable protection for both child and carer.

Staff who provide intimate care are made aware of Child Protection procedures and Health and Safety practices. Apparatus will be provided to assist with children who need special arrangements following assessment from a physiotherapist or 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.

There is careful communication with each child who needs help with intimate care in line with their preferred means of communication (verbal, symbolic, etc.) to discuss the child’s needs and preferences. The child is aware of each procedure that is carried out and the reasons for it.

Children 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 themselves as they can. This may

mean, for example, giving the child responsibility for washing themselves. Individual intimate care

plans will be drawn up for particular children as appropriate to suit the particular needs of the child.

These plans include a full risk assessment to address issues such as moving and handling and the

personal safety of the child and the carer.

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 needs help with

intimate care. Where possible one child will be cared for by one adult unless there is a sound reason

for having two adults present. If this is the case, the reasons should be clearly documented.

If a child refuses to be changed, we will first encourage them to do so, if they still refuse, we will telephone the parents or carers to ask them to come and change the child.

Parents/carers will be involved with their child's intimate care arrangements on a regular basis.

Where a care plan exists the agreed arrangements will be recorded on the child’s plan. The needs and

wishes of children and parents will be carefully considered alongside any possible constraints; e.g.

staffing and equal opportunities legislation.

When touching a child, staff should always be aware of the possibly of invading a child’s privacy and will respect the child’s wishes and feelings.

If a child needs to be cleaned, staff will make sure that:

* Protective gloves are worn
* The procedure is discussed in a friendly and reassuring way with the child throughout the process
* The child is encouraged to care for him/herself as far as possible
* Physical contact is kept to the minimum possible to carry out the necessary cleaning
* Privacy is given appropriate to the child’s age and the situation
* All spills of vomit, blood or excrement are wiped up and flushed down the toilet
* Any soiling that can be, is flushed down the toilet
* Soiled clothing is put in a plastic bag, unwashed, and sent home with the child
* Parents are encouraged to provide a spare change of clothes. If not clean clothes will be provide by the nursery.

**Hygiene**

All staff must observe precautions for avoiding infection, must follow basic hygiene procedures and have access to protective, disposable gloves and aprons.

**Protection of children**

If a member of staff has any concerns about physical changes in a child's presentation, such as

marks, bruises, soreness etc. s/he will immediately report these concerns to the Designated Senior

Person for child protection. (See Child Protection and Safeguarding Policy)

Personal safety is part of our Personal, Social and Emotional Development curriculum Education, and taught at as appropriate to children’s developmental level and degree of understanding.

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.

Two senior staff are DBS (Disclosure and Barring Service) checked.

It is not appropriate for volunteers or students to carry out intimate care procedures.

**Protection of staff**

Members of staff need to have regard to the danger of allegations being made against them and take precautions to avoid this risk.

Staff should make it known to another member of staff working close by that such care is being

provided in order to ensure reasonable protection for both child and carer.

Staff should be aware of and responsive to the child’s reactions and responses to the care.

If a child makes an allegation against a member of staff, we will follow the guidance for Allegations of Abuse Against Teachers and Other Staff.

**Policy Review**

Date policy adopted:

Signed:

Chair of Governing Body

**Intimate/Personal Care Plan**

|  |  |
| --- | --- |
| **Child’s Name** | **Date:** |
| **Main areas of need:***
*
*

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| **Toileting plan:** |
| **Dressing/undressing plan:** |
| **Medical plan:** |
| **This plan was written by on** **Agreed with parents/carers on****Child’s views were sought for this plan where relevant** **Signed………………………………… Date………………………** |