



St Peter & St Paul
CofE Primary School

Intimate Care and Close Personal Contact Policy 2019 - 2020

(This policy has been drafted having regard for the school's Christian ethos.)

	Date	Signed
Agreed by Staff:	October 2019	Mr Steve Ginn Head Teacher
Agreed by Governors:	October 2019	Mrs N Ford Chair of Governors
Lead:	Senior Leadership Team	
Review date:	October 2020	

Our School Mission Statement

We see it as our mission to grow the whole child - intellectually, emotionally, physically, socially and spiritually. To provide them, within a Christian environment, with every learning opportunity possible and to empower them to be the leaders of tomorrow.

Intimate Care and Close Personal Contact Policy

Rationale:

The purpose of this policy at St. Peter and St. Paul CofE Primary is to:

- Uphold pupils rights to privacy, dignity and compassion
- Identify situations which have elements of close personal/intimate contact
- Identify who an 'appropriate adult' is in the school setting (ie. who can carry out intimate care)
- Recognise the responsibilities of adults involved
- Safeguard pupil and adults from misinterpretation of action
- Ensure consistency of action whilst being sensitive to individual need
- Keep children safe and nurtured.
- Ensure that all waste is safely disposed of appropriately.

Aim:

Intimate care/assistance is sometimes required in our school and this policy is designed to provide necessary guidance. In particular, it is designed to provide a framework which ensures that all staff follow practices which maximise the safety, dignity and independence of children at all times whilst minimising the potential for their actions to be called into question.

Definition:

Intimate care/assistance can be defined as any activity requiring close physical contact and entering an individual's personal space.

Guidance:

The guidelines cover a variety of activities and it must be accepted that there has to be a degree of flexibility and judgement with some situations. The guidelines must be followed in the context of child protection, health and safety, and Criminal Bureau disclosure procedures including:

- DBS Checks: All adults participating in any activities including intimate/close personal contact will have undergone an enhanced disclosure check from the Criminal Records Bureau.
- Safeguarding: All safeguarding matters must be reported to the designated person in school responsible for child protection.
- Health and Safety: All staff should be aware of and adhere to the general health and safety guidelines as documented by the Local Authority. Appropriate risk assessments should be carried out. Any health and safety concerns or queries should be taken up with the head teacher.

These guidelines should also be considered alongside the school's other policies and in particular the policy on safeguarding.

Our Approach to Best Practice:

The issue of intimate care is a sensitive one and will require staff to be respectful of children's needs at all times. Children's dignity should always be preserved with a high level of privacy, choice and control when care is required. There should be a high awareness of child protection issues within this work and staff's behaviour must be open to scrutiny at all times.

Working with Parents:

We believe that our partnership with parents is an essential principle in our setting and is particularly necessary in relation to children needing intimate care. We recognise that the information required to carry out intimate care is available from parents. Parents should be encouraged and empowered to work with staff to ensure that their child's needs are identified, understood and met. This may include health care plans and any other plans which identify the support of intimate care which their child may require. Exchanging information with parents is essential however, all information which is provided should be kept confidential and should only be accessed by those members of staff who specifically require the information to assist the child.

Working with Outside Agencies:

We work closely with outside agencies and utilise their knowledge and expertise where necessary. The SENDCO coordinates this approach in conjunction with the senior leadership team.

Staff:

All staff are knowledgeable about intimate/personal care. They are aware of their responsibilities, procedures that are in place and relevant policies (including Safeguarding, Health and Safety and Confidentiality).

They will follow the child's care plan and undertake their duties in a professional manner at all times. They are fully aware of best practice including hygiene and safe disposal of clinical and body waste.

Areas of Staff Assistance:

a) Toilet/changing

The following must be taken into consideration:

1. The need for privacy, whilst being aware of the need to protect staff from allegations and pupils from possible inappropriate touching.
2. Consistency of approach with necessary information being communicated to all appropriate staff.
3. Encourage as much independence as possible using the progression of skills:
 - Opportunity
 - Dependence
 - Cooperation
 - Participation
 - Supervised independent action
 - Independence
4. Be aware of assistants' own personal hygiene and use of appropriate aids – gloves, aprons etc.

5. Be aware of general hygiene and ensure that waste is disposed of appropriately.
6. Give sufficient time for the pupil to achieve, to be aware of expectations, and be familiar with the type and frequency of prompts.
7. Ensure females (and boys who have catheters) are cleaned front and back.
8. Ensure creams, etc are only used with written permission from parents.
9. Appropriateness of male/female assistance with boy/girl pupils agreed upon.
10. Staff trained/signed off as confident and competent for medical interventions, e.g. colostomy and catheterisation and care plans are up to date and followed.
11. Secure documented parental agreement to procedures and Care plans.

b) Feeding/eating:

It is necessary to ensure that:

1. All procedures to be kept up to date with information from health professionals and parents.
2. Account must be taken of pupils' likes and dislikes and normal routine.
3. Hygiene procedures to be adhered to.
4. Care plans indicating emergency procedures to be put in place if possible choking may be an issue.
5. The importance of social interaction at snack/lunchtime should not be underestimated.

c) Physical assistance

It is important to ensure that all staff:

1. Give verbal prompts/instructions before touching, moving or handling pupils.
2. Have due regard for instructions given by therapists regarding individual pupils' movement/transfer, etc.
3. Always use equipment recommended to assist with moving/transfers.

d) Medicines and medical care

Parents are asked to fill in a Admission Information Form (copy attached as Appendix A) when their children enter St. Peter and St. Paul CofE School. This provides a variety of information including details of their medical history, special needs, dietary information and allergies. Parents are also asked to complete an Administering Medicine Checklist (copy attached as Appendix B) which gives the school permission to administer certain specified non-prescription treatments or medicines should the school deem it advisable and a Medical Questionnaire (copy attached as Appendix C) which provides details of existing medical conditions.

If it is necessary for a child to receive medicine during the school day, parents are asked to complete an Administering Medicine in School form (copy attached as Appendix D) and are asked to discuss their child's needs with a member of staff before the school agrees to administer medicines or medical care.

Any member of staff giving medicine to a child should check:

1. The pupil's name
2. Any written instructions provided by parents or a doctor
3. The prescribed dose
4. The expiry date

Once the medicine or treatment has been administered, the details of that treatment should be entered on to the administering medicine record/form (copy attached as Appendix E) which can be found on the inside of the door of the medical cupboard.

In additional, particular attention should be paid to the safe storage, handling and disposal of any medicines or medical supplies.

The Role of student/volunteer helpers:

Student/volunteer helpers/parents:

1. Should not assist with personal toileting of individual pupils but can oversee general toileting and hygiene under teacher supervision.

2. May assist helping pupils change for Physical Education if supervised by a member of the school staff with DBS certification.
3. Must not assist with any feeding requiring medical training to give food or respond to an emergency situation.
4. May assist at the dining table in general situations.
5. Must be supervised and not put in the situation where they are alone with pupils (Except in extreme emergency circumstances).

Positive Handling:

Positive Handling describes a broad spectrum of risk reduction strategies. Positive handling is a holistic approach involving policy, guidance, management of the environment, and deployment of staff. It also involves personal behaviour, diversion, diffusion, and de-escalation. Risk assessment identifies positive prevention strategies and how a pupil may need to be supported in a crisis.

Good personal and professional relationships between staff and pupils are vital to ensure good order in our school. It is recognised that the majority of pupils in our school respond positively to the discipline and control practiced by staff.

It is also acknowledged that in exceptional circumstances, staff may need to take action in situations where the use of reasonable, proportionate and necessary force may be required. The school acknowledges that physical techniques are only a small part of a whole setting approach to behaviour management.

Every effort will be made to ensure that all staff in this school:

- Clearly understand the 'Positive Handling' policy and their responsibilities in the context of their duty of care in taking appropriate measures where use of force is necessary and
- Are provided with appropriate training to deal with these difficult situations.

The Education and Inspections Act 2006 stipulates that reasonable force may be used to prevent a pupil from doing, or continuing to do any of the following:

- Self-injuring
- Causing injury to others

- Committing a criminal offence
- Engaging in any behaviour prejudicial to maintaining good order and discipline at the school or among any of its pupils, whether the behaviour occurs in a classroom, during a teaching session or elsewhere within school (this includes authorised out-of-school activities).

As teaching and non-teaching staff work 'in loco parentis' and have a 'duty of care' towards their pupils, they could be liable for a claim of negligence if they fail to follow the guidance within this policy. The use of 'School Safe', Suffolk's positive handling training techniques, is one of our control methods for reducing risks presented by children's challenging behaviour which may arise at any time.

The application of any form of physical control inevitably carries an attached risk of unintended harm and this places staff and the school at risk of potential litigation. It can only be justified according to the circumstances described in this policy. Staff therefore have a responsibility to follow this policy and to seek alternative strategies wherever possible in order to prevent the need for physical intervention. Staff must be aware that they are responsible for:

- Assessing risks (dynamic risk assessment) related to individual circumstances which may arise in the course of their day-to-day duties and
- Making judgments about when the use of force is necessary and the degree of force which may be regarded as necessary to manage a situation.

Staff need to be aware that they are required to justify their decisions in writing through the recording and reporting procedures following an incident. Reference can be made to the Positive Handling Policy for detailed information and the appropriate procedure.

Naturally, staff are also aware of touch that is invasive or which could be confusing, traumatising or experienced as erotic by the child. Should any such touch be used at any time, it would be deemed as the most serious breach of the Code of Ethics warranting the highest level of disciplinary action.

The Protection of Children:

If a member of staff has a concern about physical changes in a child's presentation, eg., marks, bruises, soreness, etc., he or she will immediately report their concerns to the appropriate 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.

If a child makes an allegation against a member of staff, all necessary procedures will be followed (see Safeguarding policy).

Conclusion:

All children who require intimate care have a right to be treated respectfully at all times; the child's welfare and dignity is of paramount importance. Staff who provide intimate care are trained to do so and are fully aware of best practice.

Period of Review

This policy will be reviewed every 3 years.

Appendix A - Sample Admission Information Form (available from the School Office)

Childs First Name: **Childs Middle Names (if any):**
..... **Sex:** M/F.

Childs Legal Surname: **Known As:** **Date of Birth:**

Address:
.....
.....
.....

Post code: **Mobile phone number:**
.....

Landline:.....
..

Email Address (this is important as it is used for communication with parents; please state NONE if no email address)
.....
.....

If the child lives at more than one address, please detail below with contact details and name of parent/guardian/carer:
.....
.....
.....
.....

Names of all Parents/Legal Guardians (in full including title Mr Ms Mrs Miss etc)

1. **Relationship to Child:**
.....

2: **Relationship to Child:**
.....

3...... **Relationship to child**
.....

SCHOOL REPORTS AND LETTERS HOME
School Reports and letters are sent to the main carer/Parents at the childs home address. If there is another parent or Legal Guardian that lives at a different address from the child who wishes to

also receive school reports/letters etc (e.g absent parent) please detail below and provide contact details for us to send them to:

Name:.....Contact No:
.....

Address:.....
.....

Email
Address:.....
.....

Daytime emergency contacts:

NameTelephone No:..... Relationship to
Child:

NameTelephone No:..... Relationship to
Child:

NameTelephone No:..... Relationship to
Child:

If child is in Public Care: Please detail

Care Authority:..... Is your child adopted: YES NO
please

Medical and Developmental Information (please detail any relevant medical history, special needs, dietary information allergies that we should be aware of. If none please state none)

G.P>: Telephone:

Please Detail all Previous Schools and Nurseries Attended

1. Name: Address/Contact No:

Date from: Date to:

2. Name: Address/Contact No:

Date from:: Date to:

Other (Please detail any other information you feel is relevant that the school should be aware of e.g absent parent non-contact)

Date wishing to commence School:

Signed: Date:
.....

Please print name:

Should you have any further information in respect of your child please attach on a separate sheet.

St Peter and St Paul CofE Primary School

**Sample Additional Information Form
Admission Part B**

Childs Name:

.....

Please complete the following information

First Language (if other than English):

Home Language:.....**Asylum Status:**

National Identity::

.....

Additional Languages spoken:

.....
.....

Ethnic Origin (please circle):

White British White Irish White Other Indian Chinese Asian (other) Black Caribbean

Black African Any other mixed background (please state)
..... Other (please state)

Mode of travel to school (please circle) WALK CYCLE TAXI CAR SCHOOL BUS

CAR SHARE CYCLE OTHER.....

Lunch arrangements (please circle) PACKED LUNCH PAID SCHOOL MEAL HOME

FREE SCHOOL MEAL

Food Allergies/Meal requirements:

.....

Position in Family: (e.g 2nd Child 1st girl or 3rd Child 3rd boy)

.....

Signed :

Date:

Appendix B

Administering Medication Checklist

We request your permission for school staff to administer the medication below should your child need it, (First aiders will be the first port of call) Please sign next to the medication you allow your child to be given in school.

Name of child Date of birth		
Class		
Medication	Signature	Date
Plasters		
Waspeze		
Calpol		
Saline Eye Wash		
Antihistamine Cream (Bite/Sting Cream)		
Antiseptic Wipes/Cream		
Splinter Picks/Tweezers		

Any other concerns:

Signed by	Parent/Guardian
Print name	
Date	

Appendix C

Medical Questionnaire

Dear Families,

Dear Families,

Please complete the questionnaire below regarding your child's medical history and return it to school.

All information will be treated confidentially.

I agree that I have read and understand the school's Privacy Notice. I agree that the School may process this information to enable the correct medical intervention, if required, of my child.

I have the right to request modification of the information that you keep on record.

I have the right to withdraw my consent and request that this information is removed from your database.

Signed:

Please Print Name:

Date:

Name of child	
Class	
Teacher	

ASTHMA

Does your child have asthma?	
------------------------------	--

If yes, what inhalers does your child use?	
What is the dosage?	
Do we have your child's medication in school?	

DIABETES

Does your child have diabetes?	
If yes, what type of diabetes?	
Does your child have a care plan?	
Do we have your child's medication in school?	

ALLERGIES

Does your child have an allergy?	
If yes, what type of allergy does your child have? / What is your child allergic to?	
What are the symptoms in the event of your child having an allergic reaction?	
Does your child take medication for their allergy?	
Do we have this medication in school?	

Does your child have a care plan for their allergy?	
---	--

EPILEPSY

Does your child have any form of epilepsy?	
If yes, what type of epilepsy does your child have?	
Does your child take any medication?	
If yes, do we have this medication in school?	
Does your child have a care plan?	
What are the triggers for your child's epilepsy?	

OTHER MEDICAL CONCERNS

EMERGENCY CONTACT

In case of an emergency please give contact details below.	
Name:	
Relationship to child:	
Telephone Numbers	Home: Mobile: Work:

Name:	
Relationship to child:	
Telephone Numbers	Home: Mobile: Work:

Doctor's name/address	
Doctor's telephone number	

Please note that any appointment letters for doctors, dentists and hospitals that are during term time will need to be seen by the school.

Appendix D

Administering Medicine in School

Please complete the form below to enable the school to administer medication to your child.

Date

I give permission for my child

To be given the medication named below.

.....at (*time*)
.....at (*time*)
.....at (*time*)
.....at (*time*)

Signed(*Parent/Guardian*)

Please print name

Appendix E

Administering medicine form*

Name	Class	Type of medicine given	Amount given	Time	Medicine given by	Position in school

*Original form is printed in a landscape format

Document History

Version	Date	Comments
Issue 1	March 2013	Initial draft adopted by governors
Issue 2	July 2015	Updated SIF form added as Appendix A. Reviewed and confirmed.
Issue 3	October 2019	Reviewed and put forward for approval.