Dignity and Care Policy



Date of policy:	January 2023	Committee:
Next review:	January 2024	Health & Safety
	Review period – 1 Year	

1. Safeguarding:

Safeguarding: All staff plan their learning for pupils in this subject by adhering to the guidelines laid out in the 2022 version of 'Keeping Children Safe in Education'. All staff are trained and told to adhere to the 'Guidance for Safer Working Practice for the Protection of Children and Staff in Education Settings May 2019' and Addendum issued May 2020 as part of the staff code of conduct. All staff are required to read the document 'What to do if you are worried a child is being abused'.

This Policy covers all offline and online activity by the same principles and is used in conjunction with our related policies for Equal Opportunities, Disability Equality Policy, Educational Visits Policy, SEND and Inclusion, Racial Equality and Harassment, Catholic Life, SRE, Prevent Policy and British Values and SMSC Policy) and the schools' Behaviour Policy and school safeguarding policies.

2. Principles

The Governing Body will act in accordance with Section 175 of the Education Act 2011 and the Government guidance 'Safeguarding Children and Safer Recruitment in Education' (2012) to safeguard and promote the welfare of pupils¹ at this school.

This school 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.

The Governing Body recognises its duties and responsibilities in relation to the Equalities Act 2010 which requires that any pupil with an impairment that affects his/her ability to carry out day-to-day activities must not be discriminated against.

This Dignity and Care Policy should be read in conjunction with the schools' policies as below (or similarly named):

- safeguarding policy and child protection procedures
- staff code of conduct and guidance on safer working practice
- 'whistle-blowing' and allegations management policies
- health and safety policy and procedures
- Special Educational Needs policy

Plus

- Staffordshire's moving and handling people guidance note
- Administration of medicines guidance

The Governing Body is committed to ensuring that all staff responsible for the intimate care of pupils will undertake their duties in a professional manner at all times. It is acknowledged that these adults are in a position of great trust.

We recognise that there is a need to treat all pupils, whatever their age, gender, disability, religion, ethnicity or sexual orientation with respect and dignity when intimate care is given. The child's welfare is of paramount importance and his/her experience of intimate and personal care should be a positive one. It is essential that every pupil is treated as an individual and that care is given gently and sensitively: no pupil should be attended to in a way that causes distress or pain.

Staff will work in close partnership with parent/carers and other professionals to share information and provide continuity of care.

Where pupils with complex and/or long term health conditions have a health care plan in place, the plan should, where relevant, take into account the principles and best practice guidance in this intimate care policy.

Members of staff must be given the choice as to whether they are prepared to provide intimate care to pupils.

All staff undertaking intimate care must be given appropriate training where appropriate.

This Dignity and Care Policy has been developed to safeguard children and staff. It applies to everyone involved in the intimate care of children.

The pastoral care of our children is central to the aims, ethos and teaching programmes in St Modwen's Catholic 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 care of children.

St Modwen's Catholic Primary School 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 our children with respect when intimate 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.

3. Definition

Intimate care can be defined as any care which involves washing, touching or carrying out a procedure to intimate personal areas which most people usually carry out themselves but some pupils are unable to do because of their young age, physical difficulties or other special needs. (In school this may occur on a regular basis or during a one-off incident.) Examples may include:

- 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 insulin.) Parents have the

responsibility to advise the school of any known intimate care needs relating to their child. School will seek parental consent to administer Intimate Care for pupils who require it – reference Appendix A: Parental Permission for Intimate Care. School will record administering Intimate care for pupils.

4. Principles of Intimate Care

The following are the fundamental principles of intimate 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 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 wipes, clean underwear and spare uniform for this purpose.

The member of Staff who has assisted a pupil with intimate care will complete the intimate care form (attached to this policy).

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.

PARENTAL PERMISSION MUST BE GIVEN BEFORE ANY MEDICATION IS DISPENSED IN SCHOOL.

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 Health Care Plan. This Care Plan will be formulated and devised with parents. If required, school staff will receive appropriate training.

SWIMMING

Children in school participate in an annual swimming programme. 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.

RESIDENTIAL TRIPS

Residential educational visits are an important part of our Key Stage 2 school experience. Particular care is required when supervising pupils in this less formal setting.

As with Extra-Curricular Activities, although more informal relationships in such circumstances tend to be usual, staff are still guided by our Child Protection procedures, Pastoral Care and Positive Behaviour Policies. 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 changing rooms, avoid remaining in changing 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.

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 must undertake a full DBS disclosure procedure.

This includes students on work placement and volunteers who may be left alone with children.

Only those members of staff who are familiar with the Dignity and Care Policy 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.

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. Report and record any unusual emotional or behavioural response by the child. A written record of concerns must be made available to parents and kept in the child's personal file.

WORKING WITH CHILDREN OF THE OPPOSITE SEX

There is positive value in both male and female staff being involved with children. Ideally, every child should have the choice for intimate care but the current ratio of female to male staff means that assistance will more often be given by a woman. The intimate care of boys and girls can be carried out by a member of staff of the opposite sex with the following provisions:

- When intimate care is being carried out, all children have the right to dignity and privacy, i.e. they should be appropriately covered, the door closed or screens/curtains put in place;
- If the child appears distressed or uncomfortable when personal tasks are being carried out, the care should stop immediately. Try to ascertain why the child is distressed and provide

reassurance;

- Report any concerns to the Designated Teacher for Child Protection and make a written record;
- Parents must be informed about any concerns.

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; and
- Treat the child as an individual with dignity and respect.

This policy was ratified by our Governors and disseminated to all staff. This policy will be reviewed in January 2024.

Appendix A

Parental Permission for Intimate Care

Should it be necessary, I give permission for _______to receive intimate 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.

Signed:

Adult with parental responsibility for:

Appendix B

St Modwen's Catholic Primary School Record of Intimate Care

Name Child	of	Date	Time	Comments	Staff Involved	Signature