

Intimate Care Policy

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1. Aims

This policy aims to ensure that:

- Intimate care is carried out properly by staff, in line with any agreed plans
- > The dignity, rights and wellbeing of children are safeguarded
- > Pupils with intimate care difficulties are not discriminated against, in line with the Equalities Act 2010
- > Parents are assured that staff are knowledgeable about intimate care and that the needs of their children are taken into account
- > Staff carrying out intimate care work do so within guidelines (i.e. health and safety, manual handling, safeguarding protocols awareness) that protect themselves and the pupils involved

Intimate care refers to any care which involves toileting, washing, changing, touching or carrying out an invasive procedure to children's intimate personal areas.

2. Legislation and statutory guidance

This policy complies with statutory safeguarding guidance outlined in Keeping Children Safe in Education 2023.

3. Role of parents

3.1 Seeking parental permission

For children who need routine or occasional intimate care (e.g. for toileting or toileting accidents), parents will be asked to sign a consent form.

For children whose needs are more complex or who need particular support outside of what's covered in the permission form (if used), an intimate care plan will be created in discussion with parents (see section 3.3 below).

Where there isn't an intimate care plan or parental consent for routine care in place, parental permission will be sought before performing any intimate care procedure.

If the school is unable to get in touch with parents and an intimate care procedure urgently needs to be carried out, the procedure will be carried out to ensure the child is comfortable, and the school will inform parents afterwards.

3.2 Intimate Care Supplies

It is the requirement that parents provide all supplies required for intimate care. ie, nappies/pull ups, wipes, nappy bags, change of underwear, change of clothes, bag for any soiled clothes to come home in.

Parents should note that school do not keep extra supplies of nappies/wipes/bags in stock. Should intimate care be required and no supplies be in school, parents will be contacted in order to replenish and supplies required for appropriate care to be given.

3.3 Creating an intimate care plan

Where an intimate care plan is required, it will be agreed in discussion between the school, parents, the child (when possible) and any relevant health professionals.ie, School Nurse, Occupational Therapist.

The school will work with parents and take their preferences on board to make the process of intimate care as comfortable as possible, dealing with needs sensitively and appropriately.

Subject to their age and understanding, the preferences of the child will also be taken into account. If there's doubt whether the child is able to make an informed choice, their parents will be consulted.

The plan will be reviewed annually, even if no changes are necessary, and updated regularly, as well as whenever there are changes to a pupil's needs.

See appendix 1 for a blank template plan to see what this will cover.

3.4 Sharing information

The school will share information with parents as needed to ensure a consistent approach. It will expect parents to also share relevant information regarding any intimate matters as needed.

4. Role of staff

4.1 Which staff will be responsible

Any roles who may carry out intimate care will have this set out in their job description. This includes Teaching Assistants. It is also part of the recruitment process to ascertain whether staff are comfortable with providing intimate care.

No other staff members, volunteers or students can be required to provide intimate care.

All staff at the school who carry out intimate care will have been subject to an enhanced Disclosure and Barring Service (DBS) with a barred list check before appointment, as well as other checks on their employment history.

4.2 How staff will be trained

Staff will receive:

- > Training in the specific types of intimate care they undertake, such as through the School Nurse, Physiotherapist or Occupational Therapist, etc. if this is required
- > Regular safeguarding training
- > If necessary, manual handling training that enables them to remain safe and for the pupil to have as much participation as is possible

They will be familiar with:

- > The control measures set out in risk assessments carried out by the school
- > Hygiene and health and safety procedures

They will also be encouraged to seek further advice as needed.

It is the responsibility of all staff caring for a child to ensure that they are fully 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, pointing etc.

To ensure effective communication:

- Make eye contact at the child's level
- Use simple language and repeat if necessary
- Wait for a response
- Continue to explain to the child what is happening even if there is no response
- Treat the child as an individual with dignity and respect.

4.3 Toilet Training

It is not the role of the school to toilet train children. Parents are encouraged to train their child at home as part of their daily routine, and school should reinforce these routines whilst avoiding any unnecessary physical contact. Where a child has continence difficulties referrals can be made to the School Nurse for support.

5. Intimate care procedures

5.1 Management of Intimate Care

A child will be encouraged to attend to their own needs wherever possible and safe to do so – depending on their age and stage of development. It may be possible to provide supervision and guidance, intervening only where necessary or if the child asks for help. The expectation is that staff will use limited touch and when physical contact is made with pupils, it will be in response to the pupils needs at the time and be of limited duration. Staff will encourage children to be as independent as they can.

Each child's right to privacy will be respected. Personal care should always be provided in an appropriate area so that the child/young person is afforded privacy. In Early years, children will change in the Reception toilets, unless it is not practical to do so. If this is the case the disabled/changing toilet will be used.

Older children should change in the disabled/changing toilet. If help is needed, one adult should be inside the room, with the door ajar and a second adult should be outside within hearing or sight of the child. Careful consideration will be given to each child's situation to determine how many adults might need to be present when a child is toileted or changed. For children in EYFS or a child who needs regular nappy changes, one child will be cared for by one adult.

5.2 How procedures will happen

Wherever possible, mobile children will be changed standing up. In Early years, children will change in the Reception toilets, unless it is not practical to do so. If this is the case the disabled/changing toilet will be used.

Children with a physical disability may be changed on a mat or on the changing table.

An individual member of staff will inform another member of staff when they are going alone to assist a pupil with intimate care. Where possible staff carrying out intimate care with a child will remain in sight / hearing of another member of staff.

No member of staff will carry a mobile phone, camera or similar device whilst providing intimate care.

Adults will be responsive to a child's reactions and make sure that intimate care is as consistent as possible Staff will have had opportunities to talk with parents and learn from them how they undertake intimate care tasks. However, they should also whenever possible, check things out by asking the child, e.g.: "Is it okay to do it this way?", "Can you wipe there?", "How does Mummy/Daddy do this?".

When carrying out procedures, the school will provide staff with:

PPE (face mask, gloves and an apron) for use during intimate care

- Nappy/soiled underwear changing is undertaken in the appointed toilet.
- Parents/carers are informed of all nappy changes/soiling accidents.
- A new set of gloves, apron and mask to be worn for every nappy/soiled underwear changing.
- Any changing mat used must be cleaned using anti-bacterial cleaner prior to any changing.
- Child to be placed on a mat during a nappy/underwear change.
- Soiled nappies and wipes to be placed in a nappy bag and then in the allocated nappy bin for appropriate disposal by cleaning/premises staff. Staff should be aware of the school's Health and Safety Policy.
- Any soiled clothes to be sent home in separate bags.
- Before dressing the child, dispose of all personal protective equipment in the appropriate bin.
- Changing area/mat should be thoroughly cleaned using anti-bacterial spray and cleaning cloths.
- Both staff member and the child must wash their hands before returning to class.
- For pupils needing routine intimate care, the school expects parents to provide, when necessary, a good stock (at least a week's worth in advance) of necessary resources, such as nappies, nappy bags, wipes, underwear and/or a spare set of clothing, bag to send soiled clothes home in.

Any soiled clothing will be contained securely, clearly labelled, and discreetly returned to parents at the end of the day.

5.3 Concerns about safeguarding

If a member of staff carrying out intimate care has concerns about physical changes in a child's appearance (e.g. marks, bruises, soreness), they will report this using the school's safeguarding procedures.

If a child is hurt accidentally or there is an issue when carrying out the procedure, the staff member will report the incident immediately to Mrs Claire Lewis (DSL, AHT) or Miss Amie Bowers (DDSL, Headteacher). In their absence, any issues should be reported immediately to another member of the Safeguarding Team or Mrs Helen Meakins(EYFS Lead) where the child is in Early Years.

If a child makes an allegation against a member of staff, the responsibility for intimate care of that child will be given to another member of staff as quickly as possible and the allegation will be investigated according to the school's safeguarding procedures.

6. Monitoring arrangements

This policy will be formally reviewed by the Safeguarding Team and EYFS Lead, annually. At every review, the policy will be approved by the Full Governing Body as well as Miss Amie Bowers, Headteacher.

7. Links with other policies

This policy links to the following policies and procedures:

- > Accessibility plan
- > Child protection and safeguarding
- > COVID-19
- > Health and safety
- > SEND
- > Supporting pupils with medical conditions



Intimate Care Plan

PARENTS/CARERS	
Name of child	
Type of intimate care needed	
How often care will be given	
What training staff will be given	
Where care will take place	
What resources and equipment will be used, and who will provide them	
How procedures will differ if taking place on a trip or outing	
Name of senior member of staff responsible for ensuring care is carried out according to the intimate care plan	
Name of parent or carer	
Relationship to child	
Signature of parent or carer	
Date	
CHILD	
How many members of staff would you like to help?	
Do you mind having a chat when you are being changed or washed?	
Signature of child	
Date	

This plan will be reviewed twice a year.

Next review date:

To be reviewed by:



Parent/carer consent form

PERMISSION FOR SCHOOL TO PROVIDE INTIMATE CARE				
Name of child				
Date of birth				
Name of parent/carer				
Address				
I give permission for the school to provide appropriate intimate care to my child (e.g. changing soiled clothing, washing and toileting)				
I will advise the school of anything the care (e.g. if medication changes or if				
I understand the procedures that will school immediately if I have any cond				
I will provide all supplies for any intim ups, wipes, nappy bags, change of ur any soiled clothes to come home in, s				
I do not give consent for my child to be given intimate care (e.g. to be washed and changed if they have a toileting accident). Instead, the school will contact me or my emergency contact and I will organise for my child to be given intimate care (e.g. be washed and changed). I understand that if the school cannot reach me or my emergency contact if my child needs urgent intimate care, staff will need to provide this for my child, following the school's intimate care policy, to make them comfortable and remove barriers to learning.				
Parent/carer signature				
Name of parent/carer				
Relationship to child				
Date				