



Intimate care policy

(Primaries)



Name of policy	Intimate Care policy (Primary)
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Reviewed by	St Cuthbert's RC Academy Trust

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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](#).

It also complies with our funding agreement and articles of association.

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 3.2 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 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.

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 at least yearly, 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.

3.3 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.

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

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, including those related to COVID-19

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

5. Intimate care procedures

5.1 How procedures will happen

When assistance is required with intimate care, this should normally be undertaken by one member of staff, however, they should try to ensure that another appropriate adult is in the vicinity who is aware of the task to be undertaken and that, wherever possible, they are visible and/or audible. Intimate or personal care procedures should not involve more than one member of staff unless the pupil's health care plan specifies the reason for this.

Any intimate care procedure should take place in the most appropriate area (toilet/medical room) in order to support the pupil's needs. Only employed staff (not supply or volunteers) will assist with intimate care and will have undergone all the safer recruitment checks, including an enhanced DBS. Access to child protection training, as well as in moving and handling, plus infection control will be provided where appropriate.

Wherever possible staff should provide verbal support and guidance in order for the child to manage their own intimate care. Only in exceptional circumstances should there be the need for any physical contact between the adult and child. If physical contact is necessary, the adult should explain to the child what needs to be done.

When carrying out procedures, the school will provide staff with: protective gloves, aprons, cleaning supplies, changing mats and bins.

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, underwear and/or a spare set of clothing.

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

5.2 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 the Headteacher/Head of school/DSL.

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 reviewed by St Cuthbert's Trust annually. At every review, the policy will be approved by executive leaders.

Appendix 1: template 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, at least, once a year.

Next review date:

To be reviewed by:

Appendix 2: template 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)	<input type="checkbox"/>
I will advise the school of anything that may affect my child's personal care (e.g. if medication changes or if my child has an infection)	<input type="checkbox"/>
I understand the procedures that will be carried out and will contact the school immediately if I have any concerns	<input type="checkbox"/>
<p>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).</p> <p>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).</p> <p>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.</p>	<input type="checkbox"/>
Parent/carer signature	
Name of parent/carer	
Relationship to child	
Date	

Appendix 3: EYFS Nappy Changing Procedures

No child is excluded from participating in our EYFS provision who may, for any reason, not yet be toilet trained and who may still be wearing nappies, or equivalent. Our schools work with parents/carers towards toilet training, unless there are medical or other developmental reason why this may not be appropriate at the time. Our schools see toilet training as a self-care skill that children have the opportunity to learn with the full support and non-judgemental concern of staff.

Procedures

- All staff are responsible where possible for changing nappies and toileting accidents in their designated class.
- Children's nappies/pull-ups/clothing are to be placed in a central base that is accessible to staff only.
- Necessary PPE should always be to hand (disposable gloves; latex powder-free gloves; bedding roll; anti-bacterial spray/wipes for cleaning mat/plinth after each use).
- All staff to ensure that nappy changing is relaxed and a time to promote independence in young children.
- All staff to be gentle when changing; they should avoid pulling faces or making negative comments about nappy content.
- Children and staff must wash their hands thoroughly in the designated area.
- Children are not to be left on the changing mat whilst staff dispose of equipment or obtain equipment.
- Older children accessing the toilet, when they have the need to, should be encouraged to be independent.
- Nappies/pull-ups should be disposed of hygienically. Any soiled clothing should be securely bagged and returned to the parents/carers at the end of the school day.
- No child should knowingly be left in wet or soiled nappies/pull-up/clothing whilst in the provision.
- If staff have any safeguarding concerns, these should be reported to the DSL and recorded on CPOMS as soon as practically possible.
- Parent/carers should be informed at the end of the day/session if their child has had to be changed.
- A brief record of any intimate care procedure should be recorded, and include the name/s of the member/s of staff who carried it out.

Please note that Health Care Plans are not necessary for children requiring support with toilet training, unless there is an underlining medical condition or SEND need.