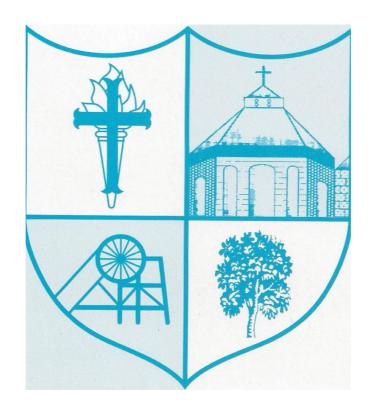
Intimate care policy

Treeton C of E Primary School



Approved by:	E.Minhas	Date: September 2024
Last reviewed on:	1.9.24	
Next review due by:	September 2025	

Contents

1. Aims	2
2. Legislation and statutory guidance	2
3. Role of parents/carers	2
4. Role of staff	3
5. Intimate care procedures	3
6. Monitoring arrangements	5
7. Links with other policies	4
A PART AND	

Appendix 1: template intimate care plan

Appendix 2: template parent/carer consent form

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 who require intimate care are not discriminated against, in line with the Equality Act 2010
- > Parents/carers 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 that 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.

3. Role of parents/carers

3.1 Seeking parental permission

For children who need routine or occasional intimate care (e.g. for toileting or toileting accidents), parents/carers 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/carers (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/carers 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/carers 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/carers, the child (when possible) and any relevant health professionals.

The school will work with parents/carers 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/carers will be consulted.

The plan will be reviewed twice a year, 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/carers as needed to ensure a consistent approach. It will expect parents/carers 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 class teachers and teaching assistants.

No other staff members 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
- Regular safeguarding training
- > If necessary, manual handling training that enables them to remain safe and for the pupil to have as much participation as 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.

5. Intimate care procedures

5.1 How procedures will happen

Aim:

- To provide a sensitive system that provides privacy for the child and promotes self help skills and independence.
- To provide a support system for the protection of the staff.

Policy for changing children who are wet / soiled:

- Only members of staff will be allowed to provide this support. This includes all support staff.
- A student or volunteer on placement must not change a nappy or provide this type of physical support.
- The child will be changed in a suitable place, which ensures privacy and dignity For children
 wearing nappies this is in the disabled toilet, on the changing bed provided. For children who do not
 wear nappies this is in the child's classroom toilet area. See changing procedure document displayed
 in EYES
- The child will be changed, wherever possible, by his/her key person.
- Staff must wear disposable gloves and an apron whilst dealing with an incident.
- Children will be encouraged to be independent. If appropriate, the child will be given clean clothes and the opportunity to change themselves in the cubicle.
- When staff need to provide physical support to undress the child, then the child will be changed in two stages down to the waist and from the waist down.

- Intimate care involves care tasks of an intimate nature, associated with bodily functions, body
 products and personal hygiene. In some instances, this may demand direct or indirect contact with or
 exposure of the genitals. Whenever possible staff will not touch the child's genitals but will give the
 necessary verbal prompts to support the child. Staff will be supported to adapt their practice in relation
 to the needs of individual children taking into account developmental stages (such as the onset of
 puberty and menstruation).
- Cotton wool and water or hypo-allergic baby wipes, (provided by the parent) will be used if necessary.
 If any creams or lotions are to be used this should be agreed with parents or details will be set out in a child's individual care plan. The school has a stock of wipes in case of children having occasional 'accidents' of wetting or soiling.
- Soiled nappies will be wrapped and placed in a hygiene disposal unit in the disabled toilet. These will be taken outside at lunchtime or the end of the day by the staff member who used the room.
- Soiled clothes will be wrapped and stored hygienically in a plastic carrier bag which has been tied, and hung on the child's cloakroom peg, before being passed onto parents/carers.
- The changing area will be cleaned after use, in accordance with school procedures (this is displayed next to the changing bed).
- The child's and adult's hands will be washed with hot water and soap as soon as the task is completed and dried with a paper towel.
- If a member of staff has any concerns about physical changes in a child's presentation, e.g. marks, bruises, soreness etc s/he will immediately report concerns to the appropriate manager/ designated person for child protection, and the appropriate safeguarding procedures will be followed (see Safeguarding Policy).

For pupils needing routine intimate care, the school expects parents/carers 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/carers 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 Mrs E Minhas (Head of school).

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 Mrs Emma Minhas bi-annually. At every review, the policy will be approved by the Executive Headteacher.

7. Links with other policies

This policy links to the following policies and procedures:

- Accessibility plan
- > Child protection and safeguarding
- > Health and safety
- > SEND
- > Supporting pupils with medical condition

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 an educational visit	
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 (WHEN AGE APPROPRIATE)	
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:

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)				
I will advise the school of anything the care (e.g. if medication changes or if				
I understand the procedures that will be carried out and will contact the school immediately if I have any concerns				
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				