

Intimate Care Policy

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1.Policy 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, manualhandling, 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 <u>statutory safeguarding guidance</u>. It also complies with our fundingagreement and articles of association through The Esteem MAT

3. Role of parents

3.1 Seeking parental permission

Many children will need some sort of intimate care during their time at school. This may be more regular. e.g., for assistance in personal care where pupils have complex learning and physical needs or for circumstances such as toileting accidents and sickness. Therefore, on entry all parents will be asked to sign a consent form for this on admission to the school. (See Appendix 1)

For children whose personal care needs are more complex, regular communication is needed between the parent/carer and the class teacher or support staff member (as designated by the classteacher) to ensure that the procedures around changing and toileting a child remain up to date, are relevant and progressive. This will ensure that wherever possible, there is a strive for all children to be as independent as possible for their personal care and life skills.

If any parent/carer wishes their child to have an Intimate Care Plan, this can be arranged in conjunction with the parent/carer, class teacher and advice from the NHS Nurse (if needed).



3.2 Sharing information

The school will share information with parents as needed to ensure a consistent approach. We expect parents to also share relevant information regarding any intimate matters as needed. If a member of staff has carried out an intimate care procedure which is unusual, parents/carers will be informed.

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 mainly includes intervention Assistants, Mid-day Learning Supervisors, but could also be teachers, members of the leadership team or even office staff if an intimate care procedure urgently needs to be carried out. As a school we have a duty of care to ensure that all pupils are comfortable and kept safe.

Every member of school staff has received Safeguarding training and all hold 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 will staff be trained

Staff will receive:

- Training in the specific types of intimate care they undertake as appropriate to the child
- Regular safeguarding training
- If necessary, manual handling training 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.

5. Intimate Care Procedures

5.1 How Procedure will happen.

Intimate care is defined as any care which involves washing, touching or carrying out an invasive procedure that most children and young people carry out for themselves, however at times, some of our pupils are unable to do this for a variety of reasons.

Therefore at School we ensure:

• That all personal care needs are carefully considered and support the parent/carers wishes and instructions.



- Where specialist equipment is used, staff will have appropriate training for other experienced staff alongside guidance from NHS Nurses, Physiotherapists and/or Occupational Therapist.
- There is careful communication with any pupil who requires intimate care in line with their preferred means of communication to discuss needs and preferences.
- Staff will be supported to adapt their practice in relation to the needs of individual children taking into account developmental changes such as the onset of puberty and menstruation.
- Pupils will be supported to achieve the highest level of independence possible, according totheir individual condition and abilities.
- The needs and wishes of children and parents will be considered wherever possible, within the constraints of staffing and equal opportunities legislation. Members of staff who are the opposite sex to the pupils are able to carry out intimate care plans.
- Procedures will be carried out in the toileting area attached to each classroom or block of classrooms according to the school's risk assessment, wherever possible.
- When carrying out procedures, the school will provide staff with protective gloves, cleaningsupplies, changing mats, if appropriate for the age of the child, 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 slips, underwear and/or a spare set of clothing.
- Any soiled clothing will be contained securely, clearly labelled, and discreetly returned toparents 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 school Safeguarding team and/or the Senior Leadership team as appropriate.

If a child makes an allegation against a member of staff, the allegation will be investigated according to the school's safeguarding procedures.

6. Monitoring arrangements

This policy will be reviewed by a member of the school senior leadership team annually. At every review, the policy will be approved by the headteacher and shared with the Governing body.



Appendix 1 – Template Parental 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 personal care (e.g. if medication chinfection)					
I understand the procedures that v contact the school immediately if I					
 I do not give consent for my child to be washed and change in case of a toileting accident. Instead, the school will contact me or my emergency contact and I/they will organise for my child to be washed and changed. I understand that if the school cannot reach me or my emergency contact, staff will need to wash and change my child, following the school's intimate care policy, to ensure comfort and remove barriers to learning. 					
Parent/carer signature					
Name of parent/carer					
Relationship to child					
Date					



Appendix 2 – Template record of intimate care

RECORD OF INTIMATE CARE						
Name of Student						
Name of	Support staff I	nvolved:				
Date	Time	Procedure	Staff Signature	Second Signature		



Appendix 3 – Link for Model Personal and Intimate care plans

Model Personal and intimate care plans can be found on the Live Pupil Plans SharePoint

These model personal and intimate care plans set out the minimum care standards expected of children and young adults who wear incontinence pads at Peak School, ensuring personal and intimate care standards are consistent across the school. Editable sections on the plans are highlighted in red allowing staff to personalise for individuals. Only these sections should be edited.

When plans have been written they must be shared with the Designated Safeguarding Lead for quality assurance and sign off before sharing with parents. Before plans can be followed in school parents must sign that they agree to the plan.