



## Intimate Care Policy

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An academy within:



“Learning together, to be the best we can be”



# 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.

We recognise that a child or young person's wellbeing is critical in maximising their potential. A child or young person's wellbeing includes physical and emotional health, safety and security. Some of our children and young people have a personalised plan for physiotherapy, occupational therapy, positioning, exercises and also for personal care. For children and young people with complex care needs this is carried out by support staff members of a class team.

# 2. Role Of Parents

## 2.1 Seeking Parental Permission

For children whose needs are more complex or who need particular support outside of what's covered in the permission form, an intimate care plan will be created in discussion with parents. Children or young people that require regular assistance with personal care have written risk assessments and procedures that are agreed by the family and staff involved.

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.

## 2.2 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 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.

### 2.3 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.

## 3. Role Of Staff

### 3.1 Which Staff Will Be Responsible

Support staff may carry out intimate care. Teaching staff in the event of an emergency or as part of a residential / school outing may carry out intimate care.

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.

### 3.2 How Staff Will Be Trained

Staff will receive:

- Guidance from parent / carer in how to undertake their child's intimate care.
- 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.



## 4. Intimate Care Procedures

Intimate care will involve a maximum of 2 persons. Where a child is known to make allegations, there will always be 2 staff present.

It is fine for male members of staff to change female pupils as long as they have an enhanced DBS with a barred list check. Views of families and the child will be sought along with the staff member. Choice in terms of male or female will be given to pupils.

Procedures will be carried out in either the disabled toilet in Lower School or the disabled toilet in Upper School.

Procedures will be carried out according to the child's risk assessment and room risk assessment.

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

School staff will be provided with protective gloves, 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 continence pads, 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. 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 immediately report concerns to the Designated Safeguarding Lead (DSL) by pink 'Cause for Concern' forms.

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 schools Pastoral Team and/or the schools Designated Safeguarding Lead.

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.



## 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	