Intimate Care Policy



Love, Learn and Shine together with Jesus

December 2022 Date of Review: July 2023

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

As part of the school's induction we will ask parents for consent for school staff to support a child if he/she has a toileting accident.

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 a positive toileting plan will be created in discussion with parents.

Where there isn't a positive toileting 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.

School staff will always encourage children to clean themselves whenever possible.

3.2 Creating a positive toileting plan

Where a positive toileting 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.

3.3 Sharing information

The school will keep a record of intimate care given and 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

All class teachers and school support staff are able to provide intimate care. Volunteers or students will not do this. In an emergency school office staff will be able to act as the over-seer.

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

5. Intimate care procedures

5.1 How procedures will happen

Positive toileting plan

Some children will have a positive toileting plan; this may be due to a medical or SEN need. Children with a plan will be looked after according to the plan. This will state the frequency of checking the nappy/pull up and who will provide the care. It will be specific to that individual child.

All children, including those with a positive toileting plan or those children who have had a toileting accident will be changed in the assessible toilet, depending on need and preference, they will go on the changing bed, lie down on a changing mat or stand. In the majority of cases children will be encouraged to clean themselves whilst guided by a staff member.

If a child refuses to get changed in the assessible toilet another place will be found where the child feels safe and comfortable. The parents and SLT/safeguarding team will be informed of where this is.

There will be 2 members of staff – one providing the care and one supervising/over-seeing. To maintain dignity and in line with safeguarding, the second member of staff will stand outside the door, which will be ajar.

In some cases the child and parent may request 1 member of staff only and they may request the door closing (this will be discussed with parents and consent sought by parents and the staff member expected to provide the care.)

Control measures

Staff will wear disposable gloves, aprons and gloves whilst dealing with an incident.

Blue roll will be placed on the changing mat/area.

Changing area will be cleaned after use.

Hot water and liquid soap is available to wash hands as soon as the task is completed

Hot air dryer or paper towels are available for drying hands

Any soiled clothing will be contained securely, clearly labelled, and discreetly returned to parents at the end of the day.if the parents request we will throw away any soiled items in correct bin.

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 safeguarding lead or a member of the safeguarding team/SLT.

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 the safeguarding lead or officer twice a year. At every review, the policy will be approved by St Matthews's governing board and 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
- SEN policy
- Supporting pupils with medical conditions

Appendices

- Appendix 1 Intimate care record to be kept in school
- Appendix 2 Intimate care sheet to be sent home
- Appendix 3 Positive toileting plan (including preference of how many adults will support)
- Appendix 4 Permission for school to provide intimate care (given to all Reception children and children in

other year groups who have toileting issues)

Appendix 1 - Intimate care record to be kept in school



This is a record of intimate care given in school. This is to be kept in the assessible toilet.

Unless agreed otherwise, the door must be kept ajar, there must be 1 person supporting the change and a second person to stand outside the toilet to supervise.

A record of the change should be given to the parents.

	CHILD'S NAME	CLASS	DATE	ADULT CHANGING	ADULT SUPERVISING
1					
2					
3					
4					
5					
6					
7					

8			
9			
10			

Appendix 2 - Intimate care sheet to be sent home

ST MATTHEW'S	S INTIMATE CARE RECORD FOR PAI	RENTS
Date	Child's Name	
has soiled/we	et in school today and has	been changed
by		
Time	Signed	

Appendix 3 - Positive toileting plan (including preference of how many adults will support)

	S CATHOLIC PRIMARY IVE TOILETING PLAN	SCHOOL	
AIM OF THE PLAN (highlight area): 1.TO SUPPORT CHILD TO OVERCOME TOILETING ISSUES AND PROMOTE INDEPENDENCE AND POSITIVE TOILETING HABITS. 2.TO SUPPORT AND ASSIST CHILD ON MEDICATION. 3.TO SUPPORT AND ASSIST CHILD WITH STOMA.			
ACTION	BY WHOM	REVIEWED	

QUESTIONS FOR THE 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	

PLAN HAS BEEN AGREED BY			
ROLE IN SCHOOL	SIGNED	DATE	
CLASS TEACHER			
SUPPORT ASSISTANT			
PARENT			
CHILD			
HEADTEACHER			
SAFEGUARDING OFFIC	ER		

Appendix 4 – Permission for school to provide intimate care (given to all Reception children and children In other year groups who have toileting issues)

ST MATTHEWS'S CATHOLIC PRIMARY SCHOOL PERMISSION FOR SCHOOL TO PROVIDE INTIMATE CARE

WE UNDERSTAND THAT OCCASSIONALLY YOUNG CHILDREN MAY HAVE TOILETING ACCIDENTS IN SCHOOL. PLEASE COMPLETE THE FOLLOWING TO GIVE CONSENT FOR SCHOOL TO PROVIDE INTIMATE CARE INCASE OF A TOILETING ACCIDENT.

TICK

OUR POLICY IS TO SUPPORT THE CHILD'S INDEPENDANCE. CHILDREN CLEAN AND CHANGE THEMSELVES AS MUCH AS POSSIBLE WITH GUIDANCE FROM AN ADULT. CHANGES WILL ALWAYS TAKE PLACE IN THE ASSESSIBLE TOILET, THE CHILD'S DIGNITY AND SAFETY IS PARAMOUNT. ONE ADULT WILL BE WITH THE CHILD (the door ajar) AND A SECOND ADULT WILL STAY OUTSIDE.

A RECORD WILL BE KEPT OF ANY CARE GIVEN AND PARENTS WILL BE INFORMED.

CHILD'S NAME

PARENTS NAME

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 that may affect my child's personal care (e.g. if medication changes or if my child has an infection)	
	1

I understand the procedures that will be carried out and will contact the school	I
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	

DATE