

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.

This policy and practice will support staff to overcome any challenges and be confident they are meeting the requirements of the Early Years Foundation Stage, Special Educational Needs and Disability Act (2001), the Disability Discrimination Act (1995), Equality Act (2010) and related legislation, Children and Families Act (2014) - Education Health Care Plans section 37 – 50. Please also see our 'Supporting children with medical conditions policy'.

The Equality Act (2010) states that the responsible body of a school must not discriminate against a person:

- In the arrangements it makes for deciding who is offered admission as a pupil.
- As to the terms on which it offers to admit the person as a pupil.
- By not admitting the person as a pupil.

It is not acceptable to ask parents to come to change their child if a child has a recognised disability as this is a direct contravention of the Act. Also leaving any child soiled for any length of time is considered a safeguarding issue since it places the child at risk of significant harm.

3. Definition

Intimate care may be defined as any activity required to meet the personal care needs of each individual child. Parents have the responsibility to advise staff of any intimate care needs of their child, and staff have a responsibility to work in partnership with children and parents.

Intimate care can include:

- Feeding
- Oral care
- Washing
- Dressing/undressing – supporting a pupil with dressing/undressing (outside the usual support already given for PE lessons or with zips, buttons etc particularly in Nursery and Foundation Stage).

- Toileting - assisting a pupil who has soiled him/herself, has vomited or feels unwell.
- Supervision of a child involved in intimate self-care.

Providing comfort or support for a distressed pupil and assisting a pupil requiring medical care, who is not able to carry this out unaided is also considered as intimate care.

4. Purpose of the Guidance

This guidance refers to all children, of any age, who may require support for intimate/personal care from an adult on a daily basis and those who may require it occasionally or exceptionally.

As with all developmental milestones, there is a wide variation in the time at which children and young people develop and intimate/personal care may need to be provided at any stage.

Staff who work with children and young people or those with special needs will realise that the issue of intimate/personal care is a difficult one and will require staff to be respectful of children's needs. Intimate/personal care can be defined as care tasks of an intimate/personal nature, children's dignity would need to be preserved and a high level of privacy, choice and control would need to be provided to them.

We are committed to ensuring that all staff responsible for the intimate/personal care of children will undertake their duties in a professional manner at all times and at the appropriate developmental level and degree of understanding. No child should be attended to in a way that causes distress or pain. This guidance is to help ensure good practice in this area.

5. Role of parents/carers

5.1 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. (see appendix 1).

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/carers (see section 5.2 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.

5.2 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 3 for a blank template plan to see what this will cover.

5.3 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.

6. Role of staff

6.1 Which staff will be responsible

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.

6.2 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.

7. Intimate care procedures

7.1 Guidelines for Good Practice

All children have the right to be safe and to be treated with dignity and respect. These guidelines are designed to safeguard children and staff. They apply to every member of staff involved with the intimate care of children. Adhering to these guidelines of good practice should safeguard children and staff.

- Involve the child in their intimate care - try to encourage a child's independence as far as possible in his/her intimate care. Where the child is fully dependent talk to them about what is going to be done and give them choice where possible.
- Treat every child with dignity and respect and ensure privacy appropriate to the child's age and situation.
- Make sure practice in intimate care is consistent.

We request that parents complete the intimate care form (Appendix 1) and, if a pupil is not toilet trained, the 'Intimate care home/school agreement' (Appendix 2) before a child starts with us in the EYFS setting, this way we can fully support your child.

- Clothing required for changing is as per normal and supports good practice.
- When changing children that have soiled, staff ask a child to lay down on a changing mat or changing station rather than attempt to change standing up, this ensures the staff member is not face-to-face with the child and avoids passing on any potential infection.
- Wherever possible, two members of staff will be in the vicinity when a child needs intimate care e.g. the second staff member could be in the adjacent room with the adjoining door open.
- Staff sign a personal care log after every change (See Appendix 4).

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

- Disposable gloves
- Disposable apron
- Cleaning supplies
- Changing mats
- Suitable bins

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.

7.2 Intimate Care Arrangements

Supporting dressing/undressing

Sometimes it will be necessary for staff to aid a child in getting dressed or undressed, (outside the usual support already given for PE lessons or with zips, buttons etc particularly in Nursery and Reception). Staff will always encourage children to attempt undressing and dressing independently.

Providing comfort or support

Children may seek physical comfort from staff, particularly in Nursery and Reception. Where children require physical support, staff need to be aware that physical contact must be kept to a minimum and be child initiated. When comforting a child or giving reassurance, the member of staff's hands should always be seen and a child should not be positioned close to a member of staff's body which could be regarded as intimate (see positive handling policy for cross reference). If physical contact is deemed to be appropriate, staff must provide care which is suitable to the age, gender and situation of the child. If a child touches a member of staff in a way that makes him/her feel uncomfortable this can be gently but firmly discouraged in a way which communicates that the touch, rather than the child, is unacceptable.

Medical Procedures

It is preferable that medication is administered at home before or after school. If it is necessary for a child to receive medicine during the school day parents/carers must complete a permission form from the school office and discuss their child's needs with a member of staff before the school agrees to administer medicines or medical care. Any member of staff giving medicine to a pupil should check:

- The pupil's name
- Prescribed dose
- Expiry date
- Written instructions provided by parents or doctor
- Complete a school medicine administration form and have it counter signed, when possible, by another member of staff.

Particular attention should be paid to the safe storage, handling and disposal of medicines. The Headteacher has prime responsibility for the safe management of medicines kept at school. Medicines should be kept in a place not accessible to pupils. Arrangements must be in place to ensure that any medication that a pupil might need in an emergency is readily available to them.

Medical Conditions

If a child has a medical condition which is likely to lead to soiling and subsequent staff intervention, specific medical advice may be sought from outside agencies, such as the school nurse, and the parents will be asked to sign a permission form so that staff can clean and change their child if necessary. If a parent does not give consent, the school will contact the parents or other emergency contact giving specific details about the necessity for cleaning the child. If the parents or emergency contact are able to come promptly, the child is comforted and kept away from the other children to preserve dignity until the parent arrives. If parents/guardians cannot be contacted - staff will decide on the most appropriate care to minimise any stress, discomfort or anxiety the child may be experiencing.

Soiling

Staff will work together in partnership with parents and carers to support each child towards independent use of the toilet. If tending to a child who has soiled themselves during the school day, staff will respond sensitively and professionally. If 'accidents' occur the child will change themselves into dry clothing, and wet items will be sent home for washing. The child's independence will be encouraged as far as possible in his/her intimate care and reassurance given. A record of the incident will be kept in school and the parent will be informed (by a note home, verbally at home collection time or phone call) and requested to return the borrowed items of clothing when laundered. If there is an occurrence of heavier soiling or vomiting, this may require staff to provide care at a more personal level. Staff will follow set procedures for this intimate care:

- If possible, the child will be removed to a less public place to maintain dignity and avoid a feeling of humiliation.
- If appropriate, the child will be encouraged, through guidance and assistance, to clean themselves to make them more comfortable.
- Parents should be contacted as soon as possible.
- Staff will provide further intimate care in the following situations:
 - If parents/guardians cannot be contacted - staff will decide on the most appropriate care to minimise any stress, discomfort or anxiety the child may be experiencing.

- If the parents/guardians are unable to come to school. o If the child is very distressed or suffering unduly.
- Intimate care will only be provided to older children in extreme circumstances. It is anticipated that older children will be able to manage any circumstances given guidance or assistance.

If incidents of soiling are a regular occurrence then a pupil care plan (see appendix 3) will need to be put in place after consultation between the school, the pupil's parents/carers and if appropriate, other outside agencies

7.3 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 DSL or DDSL.

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.

8. Monitoring arrangements

This policy will be reviewed by the DSL every two years. At every review, the policy will be approved by the governing body.

9. 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 conditions

Approved by:	Cardinham Governors	Date: 14 th May 2024
Approved on:	TBC	
Next review due by:	Annually	

Appendix 1: 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 2: Home/School Agreement to Support Staff involvement in Intimate Care

We aim to work closely with you and your child to ensure that they feel confident, secure and respected in our school/ setting.

Our Parents/ carers will help support us by:

- > changing your child/young person at the latest possible time before coming to school.
- > provide spare nappies/ pull ups, wet wipes and sufficient changes of clothes.
- > wash and return any clothing provided by the school as soon as possible.
- > a mutual agreement to the procedures to be followed during changing at school.
- > assist us by informing our staff if your child/young person has any marks/rashes.
- > encourage your child’s self-help in intimate care procedures wherever possible.
- > discuss any concerns regarding your child/young person intimate care progress with our staff.

Our staff will support you by:

- > changing your child/young person should s/he require it.
- > inform you if your child/young person has any marks/rash and take further action as appropriate.
- > encourage your child/young person in their participation in their intimate care procedures wherever this is possible
- > respect cultural practices through discussion with you, the parents/carers.

Parent/Carers Signature

Staff Signature.....

Appendix 3: 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 twice a year.

Next review date:

To be reviewed by:

Appendix 4: your personal care log

Child's Name _____ Class/session _____

Date	Time	Intimate Care Provided	Staff & Parent Signature