

Intimate Care Policy

This policy will be reviewed biannually

| Policy Type | Desirable | |
|------------------|-----------------------------|--|
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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 every child 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 child are considered

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.

In our school, safeguarding is paramount in all aspects of pupil care, including the provision of intimate care.

All intimate care must be delivered with the utmost respect for the child's dignity, privacy, and overall wellbeing. Only staff members who have received comprehensive training in both intimate care and safeguarding are permitted to provide such support. Intimate care enables inclusivity, but the student's safety and wellbeing must be of paramount importance.

3. Role of parents/carers

3.1 Seeking parental permission

Where there is not 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 contact 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 (where 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 considered. If there's doubt whether the child can make an informed choice, their parents/carers will be consulted.

The plan will be reviewed once 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 can be determined on a case-by-case basis.

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

Two members of staff should be present for any intimate care that needs to be provided.

Where possible, intimate care should be provided by an individual known and trusted by the student. However, in certain cases and when appropriate, a care provider of a different gender may be assigned on an individual, case-by-case basis. Throughout the process, the student's comfort, dignity, and privacy will be the top priorities.

Procedures will be carried out in a suitable but private area.

When carrying out procedures, the school will provide staff with protective gloves, cleaning supplies and 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.

A log will be kept, recording the name of the member of staff and student, date, time, location and brief description of any intimate care provided.

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 DSL.

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 bi-annually. At every review, the policy will be approved by the Headteacher and Trust.

7. Links with other policies

This policy links to the following policies and procedures:

Individual Health Care Plans

Supporting Pupils with Medical Conditions

Accessibility Plan

Child Protection and Safeguarding

Health and safety

SEND

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 | |

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 and contact details | | | |
| 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) | | | |
| 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 | | | |