# Intimate Care Policy

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Approved By	H Brown
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Review Date	01.09.2023
Notes	



## **Woodland Grange Primary School**

Aiming high to achieve excellence and success by working together

#### 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

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 (if used), an intimate care plan will be created in discussion with parents (see section 3.2 below).

All schools, include this:

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.

#### 3.2 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.

#### 3.3 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.

#### 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 includes teaching assistants.

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 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, including those related to COVID-19

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

#### 5. Intimate care procedures

#### 5.1 How procedures will happen

Explain your approach to staffing numbers based on your school context – for example, whether you have the capacity to have 2 members of staff present and when this will be done (such as if there is a known risk of false allegations by a pupil, or if it is an invasive procedure).

It is best practice from a health and safety and safeguarding perspective to have 2 members of staff present. If it is not possible, state your protocol for carrying out checks with the member of staff once the procedure has taken place.

Depending on your school's protocol, 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. However, this may differ for your school, so check your protocol.

Procedures will be carried out in [explain where in your school procedures will take place].

Procedures will be carried out in a COVID-safe way according to the school's risk assessment and COVID-19 protocol.

When carrying out procedures, the school will provide staff 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 nappies, 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.

#### 5.2 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 a 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 by the Head Teacher annually. At every review, the policy will be approved by FGB.

#### 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
- > Supporting pupils with medical conditions

## 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	
nis plan will be reviewed twice a year.	

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Next review date:

To be reviewed by:

## 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				
I give permission for the school to promy child (e.g. changing soiled clothing				
I will advise the school of anything th care (e.g. if medication changes or if				
I understand the procedures that will school immediately if I have any cond				
I <b>do not</b> give consent for my child to washed and changed if they have a to				
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 canno if my child needs urgent intimate car my child, following the school's intim comfortable and remove barriers to l				
Parent/carer signature				
Name of parent/carer				
Relationship to child				
Date				