



Kernow Learning
Building Excellent Schools Together

Intimate Care Policy

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Statutory or Best Practice policy:	Best Practice
Appendices:	No
School or Trust policy:	School

Meeting your communication needs:

We want to ensure that your needs are met. If you would like this information in any other format, please contact us on 01872 552648 or email stagnes@kernowlearning.co.uk

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Aims

Intimate care may be defined as any activity required to meet the personal care needs of an individual child. Intimate care may include feeding, oral care, washing, dressing or undressing, toileting, changing nappies, menstrual care, treatments such as catheter and stoma care. Intimate care also includes the supervision of a child involved in intimate self-care.

This policy has been written to safeguard children and staff.

At St Agnes Academy, we are committed to making sure every child feels safe, included and valued.

At times, due to assessed medical or developmental needs, we provide intimate care in-line with the individual child's care plan and in consultation and agreement with the family. Where children are not yet toilet trained, we recognise the need to work with the family and child to achieve independence but that in the meantime, the child will not be excluded from any part of the school's curriculum or day.

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/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

Legislation and Statutory Guidance

This policy complies with statutory safeguarding procedures (Keeping Children Safe in Education 2023).

Staff

Any roles who may carry out intimate care will have this set out in their job description. 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.

Training in the specific types of intimate care they undertake if necessary (from medical or other professionals)

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

Seeking Parental Permission

For children whose needs are more complex or who need particular support), an intimate care plan will be created in discussion with parents/carers. Where there isn't an intimate care plan 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 afterwards.

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 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.

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.

Intimate Care Procedures

Assisting a child to change his / her clothes.

This is more common in our Foundation Stage. On occasions an individual child may require some assistance with changing if, for example, he / she has an accident at the toilet, gets wet outside, or has vomit on his / her clothes etc. Staff will always encourage children to attempt undressing and dressing unaided. However, if assistance is required this will be given. Staff will always ensure that they have a colleague in attendance when supporting dressing/undressing and will always give the child the opportunity to change in private, unless the child is in such distress that it is not possible to do so. If staff are concerned in any way, parents will be sent for and asked to assist their child and informed if the child becomes distressed.

Changing a child who has soiled him/herself

If a child soils him/herself in school a professional judgement has to be made whether it is appropriate to change the child in school or request the parent/carer to collect the child for changing. In either circumstance the child's needs are paramount and he/she should be comforted and reassured throughout. The following guidelines outline our procedures but we will also seek to make age-appropriate responses.

- The child will be given the opportunity to change his / her underwear in private and carry out this process themselves.
- School will have a supply of wipes, clean underwear and spare uniform for this purpose. (A supply of clean underwear and spare uniforms are available outside the Dolphins Classroom).
- If a child is not able to complete this task unaided, school staff will attempt to contact the emergency contact to inform them of the situation.
- If the emergency contact is able to come to school within an appropriate time frame, the child will be accompanied and supported by a staff member until they arrive. This avoids any further distress and preserves dignity.
- If the emergency contact cannot attend, 2 members of staff at school will change the child if possible
- Ensure that the action you are taking is necessary. Get verbal agreement to proceed – CARE – CONCERN – COMMUNICATE. Pastoral Care Procedures
- Ensure the child is happy with who is changing them.
- Be responsive to any distress shown. Adhere to basic hygiene routines and always wear protective disposable gloves.
- Seal any soiled clothing in a plastic bag for return to parents.

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.

Assisting a child who requires a specific medical procedure and who is not able to carry this out unaided.

Our Administration of Medications Policy outlines arrangements for the management of the majority of medications in school. Parental permission must be given before any medication is dispensed in school- this form is also available on our website. A small number of children will have significant medical needs and in addition to the arrangements included in our Administration of Medications Policy will have an Individual 'Care Plan'. This Care Plan will be formulated by the relevant medical body. If required, school staff will receive appropriate training

Adhering to the following guidelines of good practice should safeguard both children and staff.

1. Involve the child in the intimate care. Try to encourage a child's independence as far as possible in his or her intimate care. Where a situation renders a child fully dependent, talk about what is going to be done and, where possible, give choices. Check your practice by asking the child or parent about any preferences while carrying out the intimate care.
2. Treat every child with dignity and respect and ensure privacy appropriate to the child's age and situation. Care should not be carried out by a member of staff working alone with a child.
3. Make sure practice in intimate care is consistent. As a child may have multiple carers a consistent approach to care is essential. Effective communication between all parties ensures that practice is consistent.
4. Be aware of your own limitations. Only carry out activities you understand and feel competent with. If in doubt, ask. Some procedures must only be carried out by members of staff who have been formally trained and assessed.
5. Promote positive self-esteem and body image. Confident, self-assured children who feel their bodies belong to them are less vulnerable to sexual abuse. The approach you take to intimate care can convey lots of messages to a child about their body worth. Your attitude to a child's intimate care is important. Keeping in mind the child's age, routine care can be both efficient and relaxed.
6. 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.
7. 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 Mrs Emma Parris-Fitzgibbon (SENDCo), Mrs Jess Mills (Headteacher & DSL) or Emma Lawton (Head of School & 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.

Monitoring arrangements

For all monitoring of local policies, we adopt a rigorous and reflective approach. We take into account multiple perspectives on the effectiveness and success of the policy and procedures in question, including:

- the experience of the member(s) of staff designing and delivering the provision;
- feedback from our pupils
- observations and feedback from staff – both internal and external
- engagement in research, relevant literature, and continuing professional development (e.g. relevant training/workshops).
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Links with other policies

This policy links to the following policies and procedures:

Accessibility plan

Child protection and safeguarding

Health and safety

SEND

Supporting Children with Medical Conditions

Appendix 1: template Intimate Care Plan

Parents/Carers	
Name of child What training staff will be given	
Type of intimate care needed	
How often care 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 2: Parent/Carer Consent for intimate care template

PERMISSION FOR SCHOOL TO PROVIDE INTIMATE CARE	
Name of child	
Date of birth	
Name of parent/carers	
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"/>
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.	<input type="checkbox"/>
Parent/carers signature	
Name of parent/carers	
Relationship to child	
Date	