

## Intimate Care Policy



**Adopted by (body):** CELT Trustees

**Approved date:** October 2022

**Review date:** October 2023

**Aims**

Mount Charles School is committed to include all children - no child is excluded from participating in activities who may, for any reason, not yet be toilet trained and who may be wearing nappies or equivalent. When children have medical or developmental needs we provide intimate care that has been recognised as an assessed need and indicated in the care plan for an individual child.

Staff will be supported to adapt their practice in relation to the needs of individual children taking into account developmental changes such as the onset of puberty and menstruation.

There is careful communication with each child who needs support in line with their preferred means of communication (verbal, symbolic, etc.) to discuss the child's needs and preferences. The child is aware of each procedure that is carried out and the reasons for it

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.

**Legislation and statutory guidance**

This policy complies with statutory safeguarding guidance. It also complies with our funding agreement and articles of association.

**Role of parents****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

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 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 to suit the circumstances of the child, it will be agreed in discussion between the school, parents, the child (when possible) and any relevant health professionals. Individual intimate care plans will be drawn up, where relevant, in line with the pupils risk assessment or personal education plan (PEP)

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.

These plans include a full risk assessment to address the personal safety and health of the child and the carer e.g. moving and handling, infection control etc.

See appendix 1 for blank template.

### **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.

### **Role of staff**

#### **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.

#### **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.

### **Intimate care procedures**

Procedures will be carried out in the children's toilets or disabled toilet.

As a basic principal, children will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each child to do as much for themselves as they possibly can. This may mean, for example, giving the child responsibility for washing themselves.

Each child's right to privacy will be respected. Careful consideration will be given to each child's situation to determine how many carers might need to be present when a child needs help with intimate care. Best practice is for two adults to be present, one caring for the child and one nearby, however one child may be cared for by one adult if necessary, the adult will then record the care and report to the SENDCo.

Wherever possible, the same child will not be cared for by the same adult on a regular basis; there will be a minimal rota of carers known to the child who will take turns in providing care. This will ensure, as far as possible, that over-familiar relationships are discouraged from developing, while at the same time guarding against the care being carried out by a succession of completely different carers.

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.

### **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 Lori Nancarrow (SENDCo) or Rachel Nile (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.

### **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).

These perspectives inform our action plans for each aspect of our school provision – with an emphasis on meaningful reflection, improvement and enabling everyone to flourish.

### **Links with other policies**

This policy links to the following policies and procedures:

- Accessibility plan
- CELT Safeguarding suite of policies
- Health and safety
- SEN



Appendix 1

<b>Intimate Care Plan</b>	
Name of child	
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	
Date	
Child views Where appropriate to include: <ul style="list-style-type: none"><li>- How many staff would you like to help?</li><li>- Do you mind having a chat when you are being changed or washed?</li></ul>	
Review:	
Signed:	
Next review date:	



Appendix 2 – template parent/carers consent form

Permission for school to provide intimate care	
Name of child	
Date of birth	
Name of parent/carers	
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	
<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. to 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>	
Parent/Carers signature	
Name of parent/carers	
Relationship to child	
Date	