

Intimate Care Policy



Responsibility: Hannah Francis

Approved on: February 2024

Next review date: July 2027

Intimate Care Policy

Statement of Intent

Lakeview school understands the importance of its responsibility to safeguard and promote the welfare of children.

Lakeview school is aware that some children may require assistance from members of staff for personal care, including toileting, either due to the age and developmental level of the child, or as a result of disability or medical need. The main aim of the school is to ensure that our children are safe, secure and protected from harm.

The intimate care policy aims to provide a clear framework for staff to ensure the safety and dignity of all children who need support with personal care, including toileting and continence management. It will also clarify for children and their families the support they can expect from school.

Principles

Lakeview school respects our children and no child is excluded from participating in our setting who may, for any reason, not yet be toilet trained and who may still be wearing nappies or equivalent. We will ensure that our children are:

- Treated as individuals
- That their right to safety, dignity and privacy is respected
- Involved with and consulted about their personal care as far as they are able
- Provided with consistency of care as far as possible

Responsibilities

School responsibilities:

- We encourage our children to be as independent as they are able with their personal care and work in partnership with parents towards toilet training, unless there are medical or developmental reasons why this may not be appropriate at the time. We provide nappy changing facilities and exercise good hygiene practices in order to accommodate children who are not yet toilet trained.
- Where children are not able to be fully continent, we will ensure that a care plan is written to ensure their needs are clarified and met (Appendix 2). The child will be included in discussions about the care plan, unless this is clearly inappropriate, as will their family. Relevant healthcare professionals, including the school nurse, may

also be consulted. The care plan will be reviewed at least annually or sooner if the child's needs change.

- School will ensure that anyone who undertakes intimate care is an employee of the school and has had appropriate safeguarding checks. Only those staff named on the individual care plan will be involved in providing support with intimate care to a child. School will ensure that sufficient staff are named on care plans and available to provide the required support in all foreseeable circumstances. If, in exceptional circumstances, any of the named staff members for an individual are unavailable, then school will ensure that a suitable alternative member of staff is on-hand to support, as required.
- Only in an emergency would staff undertake intimate care that has not been agreed with the parents/carers. This act of care would be reported to a senior member of school staff and to the parents/carers as soon as possible after the event. The reasons for this and the care undertaken would be documented by the staff member who had delivered the care.
- A written record will be kept of all support with intimate care (Appendix 3). This will include the date and time of the care, who was present and any care given that has differed from the care plan, together with the reason for this. Any changes in the child's behaviour or appearance will be documented and reported to a senior member of staff, in line with the safeguarding policy.
- Staff will communicate carefully with children, using their usual communication method, to discuss their needs and preferences. Wherever possible the child's wishes and preferences will be considered.
- School will consider the religious views, beliefs and cultural values of the child and their family as far as possible when undertaking personal care.
- School will work with the child to promote positive self-esteem and body image and independence with self-care as far as is appropriate and practical.
- School will ensure that all staff are aware of the need for confidentiality. Personal and sensitive information will only be shared with those who need to know.
- School will act according to their safeguarding policy and procedures if there are any concerns for the child's wellbeing. School will handle any complaints about the provision of intimate care in line with the schools 'Complaints Procedures Policy'.

Staff responsibilities:

- To undergo appropriate training for the provision of intimate care.

- To undertake intimate care practice respectfully, sensitively and in line with the guidelines outlined in this policy.

Governor responsibilities:

- To ensure that sufficient staff are trained to meet the needs of their learners.
- To ensure that this policy is monitored and reviewed at least every three years.

Parent/carer responsibilities

- To ensure that they provide all relevant information to school, as soon as possible, so that the needs of their child can be met. This includes the nature of their child's needs, details of any healthcare professionals involved including specialist nurses, as well as any changes in their medication, care or condition.
- To ensure that they work towards their child achieving the maximum possible level of independence at home.
- To work in partnership with school to develop and agree a care plan and provide written consent for the school's provision of their child's intimate care.
- To ensure that school always has required equipment available for their child's intimate care or toileting needs.
- To ensure that school always has their emergency contact details.

Child responsibilities

- To be as involved as possible in their intimate care and with their care plan.
- To let school staff know when they are aware that they need assistance.
- To let their parent/carer or a trusted member of school staff know if they have any concerns or feel uncomfortable at any time.

Procedures for intimate care

- Staff who provide intimate care will conduct these procedures in addition to any designated changing times if it is necessary; no child will be left in wet/soiled clothing.
- Stock is kept to ensure there will be clean underwear, wipes and any other individual changing equipment necessary.

- Before changing a child, staff will put on disposable gloves and aprons, and the changing area will be cleaned appropriately.
- Changing areas should be warm and comfortable for the children and are private from others.
- Hot water and soap are available for staff to wash their hands before and after supporting a child and the changing area will also be cleaned appropriately after use.
- Any soiled clothing will be placed in a tied plastic bag and will be returned to parents at the end of the school day.
- Any bodily fluids that transfer onto the changing area will be cleaned appropriately.
- If a pupil requires cream or other medicine, such as for a rash in an intimate area, this will be provided by parents and in accordance with the school's medical needs policy. Full parental consent will be gained prior to this.
- All children will be encouraged to use the toilet facilities and will be reminded at regular intervals to go to the toilet.
- Staff will use the 'Toilet Introduction Procedures' (Appendix 1)
- Children will be reminded and encouraged to wash their hands after using the toilet, following the correct procedures for using soap and drying their hands.

Safeguarding procedures

- The school adopts rigorous safeguarding procedures in accordance with the 'Child Protection and Safeguarding Policy' and will apply these requirements to the intimate care procedures.
- Intimate care is classified as regulated activity; therefore, the school will ensure that all adults providing intimate care have undergone an enhanced DBS check (which includes barred information) enabling them to work with children.
- All members of staff will receive safeguarding training on a regular basis, and receive child protecting and safeguarding updates as required, but at least annually.
- All members of staff are instructed to report any concerns about the safety and welfare of children with regards to intimate care, including any unusual marks, bruises or injuries, to the DSL in accordance with the school's 'Child Protection and Safeguarding policy'.
- Any concerns about the correct safeguarding of children will be dealt with in accordance with the 'Child Protection and Safeguarding policy' and the 'Allegations of Abuse Against Staff policy'.

Legal framework

This policy has due regard to the relevant legislation, including, but not limited to, the following:

- Equality Act (2010)
- Safeguarding Vulnerable Groups Act (2006)
- Childcare Act (2006)
- Education Act (2002)
- Education Act (2011)
- The Control of Substances Hazardous to Health Regulations (2002 – as amended in 2004)

This policy has due regard to the relevant statutory guidance, including, but not limited to , the following:

- DfE (2024) 'Keeping Children Safe in Education'

Related documentation

When reading this policy please be aware of and refer to the following related documents:

- Child protection and safeguarding
- Confidential reporting policy
- Managing medical needs in school policy
- First aid policy
- Health and safety policy
- Inclusion policy
- Allegations of abuse against staff policy
- Complaints procedure policy

Monitoring and review

This policy will be evaluated at the end of each academic year to ensure the policy is meeting the needs of our children. Any changes made will be communicated to staff.

Appendix 1:

Toilet Introduction Procedures

We see toilet training as a self-care skill that children have the opportunity to learn with the full support and non-judgemental concern of adults. No child will be toilet trained until fully settled and secured within the environment. Toilet training will not be introduced until it is fully established at home and the child is using the potty/toilet confidently. Children will be encouraged, not be forced.

Each child will be individually monitored and parents will be informed of the child's progress.

Initially, your child will slowly be encouraged to use the toilet/potty at home. If your child successfully uses the toilet or potty on a regular basis and is beginning to understand when they feel they need to go, only then will parents request potty training to begin at school.

- During the transitional period, it is paramount that each child's self-esteem and confidence remains high.
- A record of each nappy change will be logged on the existing Intimate Care record.
- Children training will be gently encouraged to sit on the toilet or potty every time they are changed.
- Once ready, children will transfer from nappies to underwear (or pull-ups, if necessary) and escorted to the toilet regularly.
- We will ask you to ensure there are always at least 3 full sets of spare, labelled clothes in your child's bag in case your child needs to be changed on more than one occasion.
- Parents will be asked to dress their children in appropriate clothing; easy to take on and off independently (no dungarees, belts or tricky buttons).
- Children will be reminded to go to the toilet regularly by staff.
- Accidents will be dealt with sensitively at all times.
- Children will be sensitively encouraged to undress and redress themselves, with support if necessary.
- If your child is in underwear and has persistent accidents (3 or more in one day), we may ask you to put your child in a pull-up or nappy to save upset, anxiety or stress for your child.
- Staff will always give positive praise and encouragement after each visit to the toilet.

Intimate Care Plan



Child's name:	
Date plan written:	
Name of staff to be involved in delivering intimate care:	
Intimate care needed:	
Specific support required:	Frequency of support:
Equipment required/location:	
Additional information:	

Intimate Care Plan



Intimate care plan signed by all staff/professionals involved in writing this plan:

Name	Role	Signed

Parent / ~~Carer's~~ Consent:

I give permission to school to provide appropriate intimate care support to my child as detailed above. I understand that the staff concerned have received the necessary training and have discussed the procedures with me. I will advise the headteacher or staff responsible of any medical condition or change in my child's needs which may have an effect on the provision of intimate care.

Name: _____

Signature: _____

Relationship to child: _____

Date: _____

Review date: (6 months, unless required sooner)

