



Self-help  
Self-responsibility  
Equity  
Equality  
Democracy  
Solidarity

## **Intimate Care Policy**

**First approved by Governors: Autumn 2021**

**Review Frequency: Every Three Years**

**Date of last review: Autumn 2024**

**Date of next review: Autumn 2027**



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Co-operative Academy Trust

Author	Date Created	Version	Notes
Jacqui Pearce	2021	1.0	
Jacqui Pearce	2024	2.0	

## 1. Aims and Objectives

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.

## 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).

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 yearly, even if no changes are necessary, and updated regularly, as well as whenever there are changes to a pupil's needs.

### ○ **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.

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

## **5. Intimate care procedures**

### ● **5.1 How procedures will happen**

All intimate care should be carried out with two members of staff present. If care is being undertaken within the classroom toilets, it is acceptable for one member of staff to do this as long as the door is left open, there are other members of staff in the room and it is possible to maintain the child's dignity.

Ideally, staff should only care intimately for an individual of the same sex. However, at Warren Primary School this principle may be waived due to the lack of male staff and where failure to provide appropriate care would result in negligence.

When carrying out procedures, the school will provide staff with:

- Aprons
- Gloves

In the disabled toilet adjacent to the reception classrooms the following equipment is available if required.

- A height adjustable changing bed
- Nappy bin

Areas used should be cleaned thoroughly each time.

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 the Designated Safeguarding Lead or one of the Deputies.

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 SENCo every three years. At every review, the policy will be approved by the Governing Body.