The Blue Tangerine Federation SPECIAL EDUCATIONAL NEEDS SCHOOLS POLICIES, PROCEDURES AND GUIDANCE



Intimate Care policy

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Date Governing Body Approved: September 2022

Review Period: Annually

Staff Responsibility: Josh Pollard

Date for Next Review: August 2023

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1. Aims

This policy aims to ensure that:

- Intimate care is carried out properly by staff, in line with any agreed plans (see appendix 1)
- 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/carers

3.1. Seeking parental permission

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 role across the federation working directly with children may be required to carry out intimate care with support and guidance as required.

No apprenticeship staff or volunteers 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 will staff be trained

Staff will receive:

- 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 intimate care procedures will happen

No member of staff will carry a mobile phone, camera or similar device whilst providing intimate care.

- Procedures will be carried out in designated bathrooms.
- Procedures will be carried out in a COVID-safe way according to the school's risk assessment and COVID-19 protocol.
- Relevant staff are aware of the students in their care who are in nappies or 'pull-ups' and those students who have occasional accidents.
- Young students should wear 'pull-ups' or other types of training pants as soon as they are comfortable with this and their parents/carers agree.
- An individual member of staff must inform another appropriate adult when they are going alone to assist a student with intimate care to promote safe and open working practices for both student and staff alike.
- Staff put on appropriate Personal Protective Equipment (PPE) before changing starts and the areas are prepared. New PPE are used each time a new child is changed.
- Staff will explain to the pupil about the need for assistance with intimate care. This will be communicated in a manner which best fits the pupils levels of communication and understanding. Where possible, consent should be sought before starting an intimate care procedure
- Changing supplies will be readily to hand when changing a student.
- Staff never turn their back on a child or leave them unattended whilst they are in the process of being changed.
- Staff are gentle when changing; avoiding pulling faces or making negative comments about 'nappy contents'.

- We aim to ensure that nappy changing is relaxed and a time to promote independence in children.
- We encourage pupils to take an interest in using the toilet.
- We encourage students to wash their hands and have soap and towels to hand.
- Children access the toilet when they have the need to and are encouraged to be independent.
- We dispose of nappies, 'pull-ups' or other personal hygiene items hygienically. Any soil (faeces) in nappies or 'pull-ups' is flushed down the toilet and the nappy or 'pull-up' is bagged and put in the sanitary bin provided.

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 (DSL) or a Deputy 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 Designated Safeguarding Lead annually and approved by governors at each review.

7. Links with other policies

This policy links to the following policies:

- Safeguarding and Child Protection
- Supporting pupils with medical conditions
- Health and safety

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			

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 prochild (e.g. changing soiled clothing, v						
I will advise the school of anything the care (e.g. if medication changes or if						
I understand the procedures that will school immediately if I have any cond						
I do not give consent for my child to lead washed and changed if they have a tenstead, the school will contact me or organise for my child to be given intiring changed). I understand that if the school cannot if my child needs urgent intimate care my child, following the school's intimate comfortable and remove barriers to lead	oileting accident). In my emergency contact and I will mate care (e.g. be washed and reach me or my emergency contact e, staff will need to provide this for ate care policy, to make them					
Parent/carer signature						
Name of parent/carer						
Relationship to child						
Date						