



Holly Hill  
Church School

## Intimate Care Policy

*As a Christian school our vision is to promote 'Life in All its Fullness.' Our ethos is based on our 12 Christian values of hope, honesty, patience, joy, forgiveness, tolerance, thankfulness, respect, kindness, friendship, gentleness and love. It is within the vision and the ethos that this policy is written and will be implemented.*

Date Issued: September 2023

Review Date: September 2024

Signed: ..... (Headteacher)

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## **1. Rationale and Aims**

At Holly Hill, it is our intention to develop independence in each child; however there will be occasions when additional help is required.

Our Intimate Care Policy has been developed to safeguard all children and staff.

It is one of a range of specific policies that contribute to our provision of pastoral care.

The principles and procedures apply to everyone involved in the intimate care of children.

Children are generally more vulnerable than adults, and staff involved with any aspect of pastoral care need to be sensitive to their individual needs.

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 who require intimate care are not discriminated against, in line with the Equality Act 2010
- Parents/carers are assured that staff are knowledgeable about intimate care and that the needs of their children are considered
- 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 may be defined as any activity that is required to meet the personal needs of an individual child on a regular basis or during a one-off incident. Such activities include:

- feeding
- oral care
- washing
- changing clothes
- toileting
- first aid and medical assistance
- the supervision of a child involved in intimate self-care.

Parents have a responsibility to advise the school of any known intimate care needs relating to their child.

## **2. Legislation and statutory guidance**

This policy complies with [statutory safeguarding guidance](#).

## **3. Principles of Intimate Care**

The following are the fundamental principles of intimate care upon which our policy guidelines are based:

- Every child has the right to be safe.
- Every child has the right to personal privacy.
- Every child has the right to be valued as an individual.
- Every child has the right to be treated with dignity and respect.
- All children have the right to be involved and consulted in their own intimate care to the best of their abilities.
- All children have the right to express their views on their own intimate care and to have such views considered.
- Every child has the right to have levels of intimate care that are appropriate and consistent

## **4. School Responsibilities and role of staff**

All staff working with children are subject to the appropriate Disclosure and Barring Checks. This includes student teachers on work placement and volunteers.

Only those members of staff who are familiar with the intimate care policy and other pastoral care policies of the school are involved in the intimate care of children.

### **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, including those related to COVID-19

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

## **5. Role of Parents and Carers**

Where anticipated, intimate care arrangements are agreed between the school and parents and, if appropriate, by the child. Consent forms are signed by the parent and stored in the child's file.

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 considered. If there's doubt whether the child is able to make an informed choice, their parents/carers 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.

It is the parent's responsibility to provide nappies, disposal bags, wipes and changes of clothing.

Only in an emergency would staff undertake any aspect of intimate care that has not been agreed by parents and school. Parents would then be contacted immediately.

## **6. Intimate Care Procedures**

Intimate care will be carried out as agreed in the child's individual Intimate Care Plan.

Staff members who are known to the child will take on that responsibility for changing children. The staff member who is involved will always ask the child for permission to assist them. The child will be supported to achieve the highest level of autonomy and independence that is possible given their age and ability. Careful consideration will be given to each child's situation to determine how many carers might need to be present when a child is toileted. Where possible one child will be catered for by one adult unless there is a sound reason for having more adults present.

## **7. 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 a Designated Safeguarding Lead.

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.

## **8. Links with other policies**

This policy links to the following policies and procedures:

- Accessibility plan
- Child protection and safeguarding
- Health and safety
- SEND

## **9. Monitoring arrangements**

This policy will be reviewed by Kate O'Neill, Designated Safeguarding Lead, annually. At every review, the policy will be approved by the Headteacher.

## **Appendix 1: Guidelines for Good Practice**

All children have the right to be safe and to be treated with dignity and respect.

These guidelines are designed to safeguard children and staff. They apply to every member of staff involved with the intimate care of children.

Young children and children with special educational needs can be especially vulnerable. Staff involved with their intimate care need to be particularly sensitive to their individual needs.

Staff also need to be aware that some adults may use intimate care as an opportunity to abuse children. It is important to bear in mind that some forms of assistance can be open to misinterpretation.

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

- 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 give choices where possible.
- Check your practice by asking the child or parent about any preferences while carrying out the intimate care.
- Treat every child with dignity and respect and ensure privacy appropriate to the child's age and situation.
- Make sure practice in intimate care is consistent. As a child may have multiple carers and a consistent approach to care is essential. Effective communication between all parties ensures that practice is consistent.
- Ensure any incidents where a child has received intimate care are reported to parents.
- If the intimate care is a regular, planned event there should be regular communication between home and school. This may be in the form of a home-school books, or a more formal record kept in the case of pupils with specific medical needs. In this case the School Nurse will be involved and may support staff and parents by advising what sort of information should be recorded, and monitoring the provision in school.
- 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.
- Promote positive self-esteem and body image. Confident, self-assured children who feel their body belongs 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.

- If you have any concerns you must report them. If you observe any unusual markings, discolouration or swelling report it immediately to a DSL.
- If a child is accidentally hurt during the intimate care or misunderstands or misinterprets something, reassure the child, ensure their safety and report the incident immediately to a DSL
- Report and record any unusual emotional or behavioural response by the child.

## **Communication with Children**

It is the responsibility of all staff caring for a child to ensure that they are aware of the child's method and level of communication.

Depending on their maturity and levels of stress children may communicate using different methods - words, signs, symbols, body movements, eye pointing, etc.

To ensure effective communication:

- make eye contact at the child's level
- use simple language and repeat if necessary
- wait for response
- continue to explain to the child what is happening even if there is no response
- treat the child as an individual with dignity and respect.



## **Appendix 2: Health and Safety**

### **Guidelines for Changing Children**

- If possible, children should be changed standing up or using the variable height changing table, to avoid staff lifting children.
- The child's skin should be cleaned with a disposable wipe.
- Nappy creams/lotions should be labelled with the child's name and used only if prescribed for that child (by their parents) they must not be shared.
- Disposable gloves should be worn when changing nappies. The nappy should be folded inward to cover faecal material and double wrapped in a nappy bag. Soiled nappies should be disposed of into the bin provided. The disposal bin should be lined and emptied daily, replacing the used bin liner.
- Any soiled or damp clothing should be placed in a plastic carrier bag in the bin provided in the nursery or disabled toilet
- Once the child has been changed and removed from the changing area, the surface should be cleaned with an antibacterial detergent spray or wipe and left to dry.
- Gloves, apron and any items used for cleaning the changing area will be wrapped and disposed of
- Hands should be thoroughly washed afterwards.

### Appendix 3: Intimate Care Plan

Holly Hill Church School  
**Intimate Care Plan**

Name of Child: \_\_\_\_\_ DOB: \_\_\_\_\_

What care is required?  How often?	
Number of staff needed to carry out the task (if more than one person is required , reason will be documented)	
Additional equipment required	
Child's preferred means of communication (e.g. visual, verbal). Agree terminology for parts of the body and bodily functions	
Child's level of ability i.e. what tasks they are able to do by themselves	.
Acknowledgement and respect for any cultural or religious sensitivities related to aspects of intimate care	
Plan to be reviewed:	

This plan has been agreed with the child's parent/ carer for intimate care to be provided in line with the school's **Intimate Care Policy 2023**.

Name of Parent/ Carer: \_\_\_\_\_

Signed Parent/ Carer: \_\_\_\_\_

Relationship to the child: \_\_\_\_\_

Date: \_\_\_\_\_

## Appendix 4: Consent

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 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"/>
<p>I <b>do not</b> 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. 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>	<input type="checkbox"/>
Parent/carer signature	
Name of parent/carer	
Relationship to child	
Date	