



St Newlyn East

Learning Academy



Kernow Learning
Building Excellent Schools Together

Intimate Care Policy

Version number:	V1
Date adopted by the Local Governing Body (LGB):	24 th November 2022
Scheduled review date:	November 2024
Statutory or Best Practice policy:	Best Practice
Appendices:	Yes
School or Trust policy:	School

Meeting your communication needs:

We want to ensure that your needs are met. If you would like this information in any other format, please contact us on 01872510407 or email stnewlyneast@kernowlearning.co.uk

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1. Aims

St. Newlyn East Learning Academy is committed to include all children and ensure that our school **is an inspiring community of happy, lifelong learners**. No child is excluded from participating in our school 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.

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/carers 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](#). It also complies with our funding agreement and articles of association.

3. Role of parents

3.1 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/carers (see section 3.2 below).

Where there isn't an intimate care plan in place, parental/carer permission will be sought before performing any intimate care procedure.

If the school is unable to get in touch with parents/carers 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/carers 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/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 taken into account. 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.

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/carers as needed to ensure a consistent approach. It will expect parents/carers to also share relevant information regarding any intimate matters as needed.

4. Role of staff

4.1 Which staff will be responsible

Any roles that may carry out intimate care will have this set out in their job description.

No other staff members will 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, including those related to COVID-19

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

5. Intimate care procedures

5.1 How procedures will happen

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

Colleagues ensure that no other pupils are present to respect the dignity of the pupil requiring intimate care.

As a basic principle, 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 members of trained staff might need to be present when a child needs help with intimate care. Best practice is for two members of staff to be present, one caring for the child and one nearby, however one child may be cared for by one trained member of staff if necessary. The member of staff will then record the care and report to the SENDCo.

When carrying out procedures, the school will provide staff with protective gloves, cleaning supplies, changing mats and bins.

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For pupils needing routine intimate care, the school expects parents/carers 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/carers 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 SENDCo or Headteacher(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

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 and shine.

7. Links with other policies

This policy links to the following policies and procedures:

- Accessibility plan
- Child protection and safeguarding
- COVID-19
- Health and safety
- SEN
- Supporting pupils with medical conditions

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	

This plan will be reviewed twice a year.

Next review date:

To be reviewed by:

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 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 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). 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	