

MANOR LEAS INFANT SCHOOL



Learning for Life

Intimate Care Policy

Policy number	74
Policy revision	5
Policy reviewed	Autumn 2024
Review date	Autumn 2027
Committee	FB
Authors	Headteacher / SENCo

Intimate Care Policy for Manor Leas Infant School

1. Introduction

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

3. Role of parents

3.1 Seeking parental permission

For children who need occasional intimate care (e.g. for toileting or toileting accidents), the procedure will be carried out to ensure the child is comfortable, and the school will inform parents afterwards.

For children who need routine or regular 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.

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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 intimate care plan will be reviewed twice a year, at the SEND reviews, even if no changes are necessary, and updated regularly, as well as whenever there are changes to a pupil's needs. See Appendix 2 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

Any staff member who may carry out intimate care will have this set out in their job description. 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.

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

It is best practice from a health and safety, and safeguarding perspective, to have 2 members of staff present. If this is not possible, one member of staff may carry out the intimate care procedure and another member of staff will check in with the member of staff once the procedure has taken place. If there is a known risk of false allegations by a pupil, or if it is an invasive procedure, two members of staff should be present.

Procedures will be carried out in the relevant year group cloakrooms, toilet near the school office or the medical room.

Staff will have access to:

- Changing mat or bed
- Disposable gloves

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- Disposable aprons
- Cleaning supplies (the changing area will be cleaned after use)
- Hand washing and drying facilities
- Bins (soiled nappies are to be double wrapped and need to be disposed of)

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.

6. 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 Headteacher or Assistant Headteacher.

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.

7. Monitoring arrangements

The headteacher and staff will review this policy and present any amendments to the trustees for discussion in Autumn 2027. This policy is signed on behalf of the board of trustees by:

C. Rossington

Chair of Board of Trustees

Date: October 2024

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Appendix 1: 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)	
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)	
I understand the procedures that will be carried out and will contact the school immediately if I have any concerns	
<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).</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>	
Parent/carer signature	
Name of parent/carer	
Relationship to child	
Date	

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Appendix 2: 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	
What language & behaviors staff will use when managing intimate care/how staff will manage discretion	
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?	
Is there anything you would like us to know/do?	

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PARENTS/CARERS

Signature of child	
Date	

This plan will be reviewed twice a year.

Next review date:

To be reviewed by:

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Appendix 3 - Record of agencies involved

Child's Name: _____ D.O.B: _____

Name/role:	
Parent/Carer:	
School Nurse/Health Visitor:	
Continence Advisor:	
Physiotherapist:	
Occupational Therapist:	
Hospital Consultant:	
Hospital School Service:	
Physical / Sensory Service:	
GP:	
EP:	
Social Worker:	