



Handforth Grange Primary School

Intimate Care Policy

Policy Area	Safeguarding Policy
Policy Title	Intimate Care Policy
Policy Leader	Leadership Team
Policy Date	March 2023
Policy Review	March 2024



Frank Field
Education Trust

*Promoting **Social Justice** through **Excellence in Education***

1. Rationale

It is our intention to develop independence in every child who attends Handforth Grange, however there will be occasions when help and assistance is required. Our intimate care policy has been developed to safeguard both the children in our care and our staff. It is one of a range of specific policies that contribute to our 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. 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 can include:

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

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

2. Aims

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

3. Legislation and statutory guidance

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

4. 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, 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 possible.

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.

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 taken into account; and
- every child has the right to have levels of intimate care that are appropriate and consistent.

School Responsibilities

All staff working with children are subject to a DBS (Disclosure and Barring Service) check, as well as having their qualifications and eligibility to work in the UK verified. 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. Wherever possible, intimate care will be provided by a known, regular carer to protect the child's privacy as much as possible.

Where anticipated, intimate care arrangements are agreed between the school, parents/carers and, if appropriate, the child. These are included within the children's statements as a focused objective, which are then signed by the parent/carer and stored in the child's file. Only in emergencies would staff undertake any aspect of intimate care that has not been agreed by parents/carers and school. In these situations, staff would complete the intimate care record book, stating the child, situation, time and care provided, which would then be signed. Parents/carers would then be contacted in relation to the care provided.

Intimate care arrangements should be reviewed at least yearly and in some cases more often than that. The views of all relevant parties should be sought and considered to inform future arrangements. If a staff member has concerns about a colleague's intimate care practice, he or she must report this to the Headteacher and designated safeguarding lead (Andrea Booth).

Mutual respect needs to be established between the child, member(s) of staff and parents/carers.

Staff need to be wary of their actions and the language they use when involved in intimate care. The child should always be fully aware of what is going on and what the person is doing. Wherever possible, the carer should discuss what needs to be done in advance. The language used needs to be respectful of the individual involved and the child should never be made to feel inadequate, uncomfortable or that it is their fault. Nor should staff be expected to provide intimate care if the parents'/carers have not adhered to the signed Home/School intimate care agreement.

To ensure that the member of staff is not open to accusations of malpractice, a signed record should be kept of all intimate and personal care tasks undertaken (unless already stated on the child's EHCP/ SEN Support Plan/Care Plan) and, where these have been carried out in another room, should include times left and returned. If the child has some degree of independence and only requires lifting to the toilet for example, they should be left to relieve themselves alone, returning only when the child has signaled that they have finished. Pupils should be encouraged to act as independently as possible and to undertake as much of their own personal care as is possible and practicable. When assistance is required, this should normally be undertaken by one member of staff, however, they should try to ensure that another member of staff/appropriate adult is in the vicinity. Intimate or personal care procedures should not involve more than one member of staff unless the pupil's care plan specifies the reason for this.

Guidance 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.

1. 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/carers about any preferences while carrying out the intimate care.

2. Treat every child with dignity and respect and ensure privacy appropriate to the child's age and situation.

To keep the dignity of the child, there should be only one carer involved in the intimate care unless the needs of the child require a second adult. If the intimate care is to be a longer process than normal, eg showering, then a second adult would be required to safeguard the child and member of staff.

3. Make sure practice in intimate care is consistent.

As a child may have multiple carers a consistent approach to care is essential. Effective communication between all parties ensures that practice is consistent. Wherever possible, the intimate carer should be consistent with that child and only during unforeseen circumstances, eg

staff absence, should this be different. When this is the case, a member of staff who knows the child and intimate care policy should be on hand, with two adults present.

4. Be aware of your own limitations

Only carry out activities you understand, feel competent and capable with. If in doubt, ASK. Some procedures must only be carried out by members of staff who have been formally trained and assessed.

5. 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.

6. If you have any concerns you must report them.

If you observe any unusual markings, discolouration or swelling, report it immediately to the designated lead or deputy for Safeguarding. 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 the designated teacher. Report and record any unusual emotional or behavioural response by the child. A record of concern must be made on CPOMS in the child's personal file or via the DSL or safeguarding deputy and made available to parents.

Working with children of the opposite sex

There is positive value in both male and female staff being involved with children. Ideally, every child should have the choice for intimate care but the current ratio of female to male staff means that assistance will more often be given by a woman.

The intimate care of boys and girls can be carried out by a member of staff of the opposite sex with the following provisions:

- discussion with the child and the parents/carers, as well as the member of staff, to ensure that everyone involved is comfortable with the process;
- when intimate care is being carried out, all children have the right to dignity and privacy, ie they should be appropriately covered, the door closed or screens/curtains put in place;
- if the child appears distressed or uncomfortable when personal tasks are being carried out, the care should stop immediately. Try to ascertain why the child is distressed and provide reassurance;
- report any concerns to the designated teacher for safeguarding and make a written record using the appropriate concern sheet, and parents must be informed about any concerns.

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; and
- treat the child as an individual with dignity and respect.

This policy links to the following policies and procedures:

- Accessibility plan 2023-24
- Child Protection and Safeguarding Policy 2023-24
- Health and safety Policy 2023-24
- SEND Policy 2023-24
- FFET Whistleblowing Policy 2023-24

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 annually or when needs change.

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"/>
Where children require nappies to be changed, I give permission for the school to provide appropriate intimate care to my child (e.g. using nappy wipes, applying nappy cream where needed)	<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	

This plan will be reviewed annually or when needs change.

Next review date:

To be reviewed by:

