Excalibur Academies Trust

Intimate Care Policy

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Approved by	Mrs S Cartland, Vice Principal and Designated Safeguarding Lead
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Contents

1. Aims 1
2. Legislation and statutory guidance 1
3. Role of parents 1
4. Role of staff 2
5. Intimate care procedures 2
6. Monitoring arrangements 3
7. Links with other policies 3
Appendix 1: template intimate care plan 4
Appendix 2: template parent/carer consent form 5

1. Aims

1.1 This policy aims to ensure that:

1.1.1 Intimate care is carried out properly by staff, in line with any agreed plans.

1.1.2 The dignity, rights and wellbeing of children are safeguarded.

1.1.3 Pupils with intimate care difficulties are not discriminated against, in line with the Equalities Act 2010.

1.1.4 Parents are assured that staff are knowledgeable about intimate care and that the needs of their children are taken into account.

1.1.5 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.

1.2 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

2.1 This policy complies with statutory safeguarding guidance.

3. Role of parents

3.1 Seeking parental permission

3.1.1 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.

3.1.2 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).

3.1.3 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.

3.1.4 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

3.2.1 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.

3.2.2 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.

3.2.3 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.

3.2.4 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.

3.2.5 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

4.1.1 Any roles who may carry out intimate care will have this set out in their job description. This includes: Health Care Assistants, Learning Support Assistants, SMSAs, Teachers, SLT.

4.1.2 No other staff members can be required to provide intimate care.

4.1.3 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

4.2.1 Staff will receive:

4.2.1.1 Training in the specific types of intimate care they undertake.

4.2.1.2 Regular safeguarding training.

4.2.1.3 If necessary, manual handling training that enables them to remain safe and for the pupil to have as much participation as is possible.

4.2.2 They will be familiar with:

4.2.2.1 The control measures set out in risk assessments carried out by the school.

4.2.2.2 Hygiene and health and safety procedures, including those related to COVID-19

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

5. Intimate care procedures

5.1 How procedures will happen

Where intimate care is required two trained members of staff will be present. Where possible, one staff member will be a medical coordinator.

An intimate care log entry with be made and both staff members will sign it.

Procedures will be carried out in the school medical center or nearest accessible toilet/shower.

When carrying out procedures, the school will provide staff with: protective gloves, sanitizing hand gel, sanitary/medical waste bins, cleaning supplies and items to protective clothing such as aprons.

5.1.2 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.

5.1.3 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

5.2.3 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.

5.2.4 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 Leader (DSL).

5.2.5 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 SENDCO and DSL, annually. At every review, the policy will be approved by the Principal.

7 Links with other policies

7.1 This policy links to the following policies and procedures:

7.1.3 Accessibility plan.

7.1.4 Child protection and safeguarding.

7.1.5 Health and safety.

7.1.6 SEND.

7.1.7 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 annually.

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)	☐
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	☐
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). 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.	☐

Parent/carer signature	
Name of parent/carer	
Relationship to child	
Date	