



Intimate Care Policy

Statement of Intent

It is our intention to develop independence in each child, however there will be occasions when help is required. Our intimate care policy has been developed to safeguard children and staff. Intimate care refers to any care that involves toileting, washing, changing or carrying out an invasive procedure to children's intimate personal areas following a toileting incident. The principles and procedures apply to everyone involved in the intimate care of children. Our policy aims to ensure that:

- Intimate care is carried out properly by staff, in line with any agreed plans
- The dignity, rights and well-being of children are safeguarded
- Children who require intimate care are not discriminated against, in line with the Equality Act 2010
- Parents are assured that staff are knowledgeable about intimate care and that their 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 children involved

Legislation and statutory guidance

This policy complies with statutory safeguarding guidance as stated in the DfE statutory guidance (Working together to Safeguard Children) and keeping children safe in education. It also complies with the safeguarding and welfare requirements of Early Years Foundation Stage framework, the Disability Discrimination Act 2005 and the Equalities Act 2010.

Role of Parents / Carers

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 (Appendix 1).

For children whose needs are more complex or who need particular support outside of what is covered in the permission form, an intimate care plan will be created in discussion with parents

Howe Dell 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

When 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 / carers and an intimate care procedure urgently needs to be carried out, the procedure will be carried out to ensure the child is comfortable, this will be logged by the school and the parents will be informed afterwards

Role of Staff

All staff may carry out intimate care as stated in job descriptions

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.

Role of Governors

To ensure that there are appropriate toileting facilities to meet the needs of all the children, including those with health issues linked to bladder or bowels.

To ensure that sufficient staff are trained to meet the needs of the children in their care.

Creating an Intimate Care Plan

When an intimate care plan is required, it will be agreed in discussion between school staff, parents, the child (where possible) and any relevant health professionals (See Appendix 2).

Howe Dell 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 preference of the child will be taken into account. If there is doubt whether the child is able to make an informed choice, the child's parent will be consulted.

The plan will be reviewed annually, even if no changes are necessary, and updated whenever there are changes to a child's need.

Training

Staff will receive:

- Training in the specific types of intimate care they undertake, regular safeguarding training and if necessary, manual handling training that enables them to remain safe and for the child to have as much participation as possible

Staff will be familiar with:

- The control measures set out in risk assessments carried out by Howe Dell and hygiene and health and safety procedures

Intimate care procedures

Intimate care may be carried out by one member of staff and they must inform another member of staff once they have completed the care. If the care is an invasive procedure, two members of staff must be present.

On completion, two members of staff will complete and sign the record of care intervention (See Appendix 1A)

Procedures will be carried out in toilet areas. Howe Dell will provide changing mats, wipes, nappy bins and protective gloves and aprons for staff (which must be worn at all times when carrying out intimate care procedures).

Howe Dell will provide a safe and discrete area for the delivery of therapies and the giving of medicines. School will provide a safe means of disposing of used medical equipment (e.g. syringes) and bins for disposal of any waste

For children requiring routine intimate care, parents need to provide a stock of necessary resources such as nappies, underwear and / or spare sets of clothing.

Any soiled clothing will be contained securely, clearly labelled and discreetly returned to parents at the end of the day.

First Aid

Any members of staff who administer first aid should be appropriately trained in accordance with LA guidance.

Concerns about Safeguarding

At Howe Dell, best practice is promoted and all adults will be encouraged to be vigilant at all times, to seek advice where relevant and take account of safer working practice.

Staff are trained on the signs and symptoms of child abuse which are in line with Hertfordshire Safeguarding Children's Partnership guidelines. If a member of staff is concerned about any physical or emotional changes, such as marks, bruises, soreness, distress etc, they will inform the Designated Safeguarding Lead (DSL) immediately. In the absence of the DSL, a member of staff will inform the Deputy Designated Safeguarding Lead immediately in accordance with the school's Safeguarding Policy and Keeping Children Safe in Education.

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 their Phase Leader. Any issue will be discussed with parents / carers to resolve the issue.

If a child makes an allegation against a member of staff, the procedure set out in the Safeguarding Policy will be followed.

Guidelines for good practice

Providing intimate care is considered as a reasonable adjustment for children who are not toilet trained, not able to use the toilet independently, or need other help or assistance with intimate tasks. This is because failing to do so would infringe upon those pupils' rights to access education due to a disability, under the Equality Act 2010.

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 additional needs (SEND) can be especially vulnerable. Staff involved with their intimate care need to be particularly sensitive to their 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 this in mind that some forms of assistance may be open to misinterpretation. Adhering to the following guidelines of good practice should safeguard children and staff:

- Involve the child in 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
- Be aware of your own limitations
- Promote positive self-esteem and body image

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

Monitoring arrangements

The phase leader for the phase is responsible for monitoring that the care is provided in accordance to the child's intimate care plan.

This policy will be reviewed bi-annually and ratified by the Governing Board.

Policy Links

This policy links to the following policies: Equalities, Child Protection, Health and Safety (all found on the school's website or available as a paper copy on request)

PERMISSION FOR SCHOOLS TO PROVIDE INTIMATE CARE

Name of child	
Date of birth	
Name of parent / carer	

I give permission for the school to provide appropriate intimate care to my child (e.g. changing soiled clothes, 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 my child has an infection)	<input type="checkbox"/>
I understand the procedures that will be carried out and I will contact the school immediately if I have concerns	<input type="checkbox"/>
<p>I do not give the school consent for my child to be washed and changed following a toileting accident.</p> <p>Instead the school will contact me or my emergency contact and I / they will organize for my child to be washed and changed.</p> <p>I understand that if the school cannot reach me or my emergency contact, staff will need to wash and change my child, following the school's intimate care policy, to ensure comfort and remove barrier to learning.</p>	<input type="checkbox"/>

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

APPENDIX 1A



RECORD OF INTIMATE CARE INTERVENTION

Child's Name..... DOB.....

Name of senior member of staff responsible for ensuring care is carried out in accordance with policy

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Date	Time	Procedure	Staff signature	Second signature

INTIMATE CARE PLAN

Parents / Carers	
Name of child	
Date of birth and year group	
Type of intimate care needed	
Frequency of care	
Name and role of medical professional who has provided advice for the plan (if applicable)	
Medical advice / details of medication (if applicable)	
What resources and equipment will be used, and who will provide them?	
How procedures will differ if taking place on an off-site excursion	
Name of senior member of staff responsible for ensuring care is carried out according to the intimate care plan.	
Name of parent / carer	
Relationship to child	
Signature of parent / carer	
Date	

Child	
How many members of staff would you like to help?	
Do you mind having a chat when you are being changed / washed?	
Signature of child	
Date	

Plan review date (annual or more frequently if required)	
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Considerations when drawing up an Intimate Care Plan	
Who are the main staff undertaking the care plan?	
Who is the senior leader overseeing the plan?	
Frequency of support?	
Any preventing risks? <i>Communication, comprehension, pupil mobility, moving and handling, behaviour</i>	
Is staff capacity / ratios at risk?	
Medical considerations	
Safeguarding considerations	
Required equipment (and safe disposal)	
Location of most suitable facilities	