



**Talavera Junior School
INTIMATE CARE POLICY**

Document Name: Intimate Care Policy

Latest Review: September 2024

Next Review Planned: September 2026

Signed: _____ Clare Litiwn _____ (Policy Owner)

Print Name: _____ CLARE LITWIN _____

Review Date: _September 2026 _

Signed: _____ (Governor Approval)

Print Name: _____

Approval Date: _____

Talavera Junior School
Intimate Care Policy

POLICY CHANGE HISTORY

Version	Date	Status	Policy Owner	Governor Approval	Comment
1.0		Approved	RS	CR	
2.0	5/01/15	Approved	RS	CR	
3.0	28/02/18	Approved	AW	CR	Updated roles
4.0	28/01/20	Approved	AW	SK	Updated re roles and processes
5.0	13/01/21	Approved	CL	SK	Punctuation changes
6.0	09.01.2023	Approved	CL	RJ	Updated advice to protect staff and pupils: point 8 in Our approach to best practice . Under Child protection section: communication difficulties added due to new hub provision.
7.0	07.09.2024	Approved	CL	RJ	Complete change to be in line with the federation.

1. 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 who require intimate care are not discriminated against, in line with the Equality 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 that 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](#).

3. Role of parents/carers

3.1 Seeking parental permission

If a child is unable to perform intimate care and there is no plan or parental consent for routine care in place, parental permission will be sought before performing any intimate care procedure. When a child can be independent then an adult will talk them through but the child would complete the process.

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.

Before the child starts the school will gather as much information as possible from the parents/carers and child. For example: How have they tried to introduce toilet training at home? What happens at home? Has the child any regular routines or daily patterns which could inform the routine set up by the school?

An appropriate toileting programme will be developed through discussion and agreed so that the child, parents/carers and staff are aware of their roles and responsibilities.

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.

Children that require high levels of assistance the school will provide with support from external agencies whenever necessary.

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.

The school, in partnership with parents/carers, child and any other professionals involved, will make and review care plans, working towards achieving maximum independence of the child with toileting

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.

3.4 Good practice

- The school will organise for a member of staff familiar with the child to take on the responsibility of taking the child to the toilet at fixed, appropriate intervals throughout the morning/day. Careful observations and discussions with the child may identify when the child "needs to go".
- The school will ensure that the routine established in school is strictly maintained from the start and try hard to avoid accidents. If necessary we will shorten the time between visits to the toilet so that the child gets into the habit of being dry.
- Children may be anxious and pre-occupied by toilet difficulties but usually respond to praise, encouragement and confidence building. The school recognises the importance to promote self esteem in other areas of school life.
- Drinking water is easily accessible for all children and they are encouraged to have "little and often" rather than in huge amounts at a time
- Reminders to use the toilet will be discreet and staff may consider the use of signs, pictures or code words
- Staff will make little fuss over accidents that do occur and ensure that they are dealt with swiftly, appropriately, sympathetically and in a calm, low-key way. Give extra attention when they have made the effort to go to the toilet independently.
- After a period of training it may be sufficient to remind the child to go to the toilet on their own. Staff will be positive and patient and praise the child for their effort.
- The school recognises the importance to anticipate toileting needs for these pupils before planning off site activities. Children will not be excluded from off-site activities because of their toileting needs.

4. Role of staff

4.1 Which staff will be responsible

Any staff who may carry out intimate care must read this policy.

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

5. Intimate care procedures

5.1 How procedures will happen

It is best practice from a health and safety and safeguarding perspective to have 2 members of staff present. If it is not possible, the member of staff that has had to change a child will tell the class teacher and parents will be informed that their child had to be changed.

At Wellington, procedures will be carried out in the pupil toilets or the disabled toilets (one in the KS1 area and one by the school office). The door will be pulled to nearly closed and a staff lanyard placed on the doorhandle to protect dignity. Another member of year R staff must be aware of the proceedings and be told when it is completed.

At Marlborough, in the reception class, children will be changed near to the toilet area and behind a screen. The person who undertakes this must ensure that another person in the room is aware a child is being changed and when it is completed. In year 1 and 2, procedures will be carried out in the first aid area, with the curtain drawn. Another member of staff nearby must be made aware of what is happening and when it is completed.

Most children will be verbally supported to change and clean themselves.

On the occasion of a child having SEND that prohibit them from cleaning themselves, they will be supported by an adult from their year group as agreed with parents. This will be clearly set out in their care plan and if needed, a risk assessment.

When carrying out procedures, the school will provide staff with:

protective gloves, cleaning supplies, changing mats (if applicable) and bins.

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 DSL, Sarah Mackle at Marlborough and Russell Davies at Wellington.

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 Victoria Hotham and Sarah Mark-Richards, annually. At every review, the policy will be approved by the governing board.

7. Links with other policies

This policy links to the following policies and procedures:

- Accessibility plan
- Child protection and safeguarding
- Health and safety
- SEND
- 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	

