

# INTIMATE CARE POLICY

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## **Prospere Learning Trust**

is a Multi-Academy Trust

Registered in England and Wales number 10872612 Registered Office: Firbank Road, Manchester, M23 2YS

The Prospere Learning Trust has several trust - wide policies which are adopted by all schools/academies in the Trust to ensure an equitable and consistent delivery of provision.

The Trust Board has responsibility for the operation of all schools/academies and the outcomes of all students; however responsibility is delegated to the Local Governing Body of each school via the Scheme of Delegation.

Within our policies reference to:

- . Governing Body/Governors relates to the members of the Local Governing Boday representing the Trust Board
- School includes a reference to school, academy or free school unless otherwise stated
- · Headteacher includes a reference to Headteacher, Principle or Head of a School, academy or free school



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Appendix 1: template intimate care plan

### 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 with intimate care difficulties are not discriminated against, in line with the Equalities Act
- 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 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 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.

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 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.

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

All classroom staff may be required to provide intimate care - Teachers, TAs, LOs, etc.

All staff at the school 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 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**

#### 5.1 How procedures will happen

Pupils will have an intimate care plan which states the procedures to be used. This will usually involve care on a 1:1 basis unless otherwise stated

Procedures will be carried out in the nearest bathroom to the pupil's classroom.

Procedures will be carried out in a COVID-safe way according to the school's risk assessment and COVID-19 protocol.

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

- Gloves
- Wipes
- Bins
- Cleaning Supplies

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.

#### 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 class teacher, who will, in turn inform their head of department.

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 every three years. At every review, the policy will be approved by the headteacher.

## 7. LINKS WITH OTHER POLICIES

This policy links to the following policies and procedures:

- Accessibility plan
- Child protection and safeguarding
- COVID-19
- Health and safety
- SEND
- Supporting Pupils with Medical Conditions



## Appendix 1: Example intimate care plan

#### CONFIDENTIAL

PERSONAL CARE PLAN					
Name of Pupil:				GRANGE SCHOOL	
Date of plan:	Re	eview Date:		OKA MOL DOLLOOL	
This plan has been discussed with parents/carers and the pupil, if appropriate. Signed permission has been obtained for this plan to be followed during the school day. This plan is to be reviewed yearly (or sooner if needs change) in consultation with parents/carers and pupil, if appropriate.					
Medical Information:					
Mobility:					
Communication Skills:		D : 1	r. 61		
Staff Involved with Porce	nal Caro	Detail	s of Plan		
Plan:	Staff Involved with Personal Care Plan:		ung, Sarah Phythian, Stuart Harris		
Facilities, Resources & Equipment needed: Additional Roles of Support Staff:					
Confidentiality Agreen	<u>nent</u>		ent of Personal Card		
Level of Supervision for Personal Care Needs:					
I have read and agree to this procedure for {Name of Pupil}:  Parent/Carer  Date:					
·			rarent/carer	Date:	
·			TA	Date:	
i e			Class teacher	Date:	
			SENCO/AHT	Date:	
Termly Staff Briefing Please date and initial in the boxes below following each briefing on the contents of this protocol.					
Term 1		Term 2	82.80	Term 3	