



## **INTIMATE CARE POLICY**

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Date policy reviewed	Spring Term 2026
Date for next review	Spring Term 2027
Committee responsible	FGB
Authorisation	Ryan Brown

## **INTRODUCTION**

Staff who work with children who have additional needs will ensure that the administration of intimate care will be delivered mindfully and respectfully.

Intimate care is defined as care tasks of an intimate nature, associated with bodily functions, body products and personal hygiene which demand direct or indirect contact with or exposure of the genitals. Examples include care associated with continence and menstrual management as well as more ordinary tasks such as help with washing or bathing.

Staff deliver a full personal safety curriculum, as part of Personal, Social and Health Education to all children as appropriate to their developmental level and degree of understanding. Parents are encouraged to reinforce the personal safety messages within the home.

Hanslope School is committed to ensuring that all staff responsible for the intimate care of children will undertake their duties in a professional manner at all times.

## **OUR APPROACH TO BEST PRACTICE**

All children who require intimate care are treated respectfully at all times; the child's welfare and dignity are of paramount importance.

Staff who provide intimate care will be trained to do so (including Child Protection and, if needed, Health and Safety training in moving and handling) and are fully aware of best practice. Apparatus will be provided to assist with children who need special arrangements following assessment from physiotherapist/occupational therapists as required.

Staff will be supported to adapt their practice in relation to the needs of individual children considering developmental changes such as the onset of puberty and menstruation. Wherever possible staff who are involved in the intimate care of children will not usually be involved with the delivery of sex and relationship education to their children as an additional safeguard to all parties involved.

There is careful communication with each child who needs help with intimate care in line with their preferred means of communication (verbal, symbolic, etc.) to discuss the child's needs and preferences. The child will be aware of each procedure that is carried out and the reasons for it.

As a basic principle, children are supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage independence where possible for each child to do as much for themselves as they can. This may mean, for example, giving the child responsibility for washing themselves. Individual intimate care plans will be established on an individual basis as appropriate to suit the circumstances of the child. These plans include a full risk assessment to address issues such as moving, handling and personal safety of the child.

Each child's right to privacy is respected. Careful consideration is given to each child's situation to determine how many carers might need to be present when a child needs help with intimate care. Where possible one child will be cared for by two adults. If this is the case, the reasons should be clearly documented in the care plan.

Wherever possible the same child is not cared for by the same adult on a regular basis; best practice indicates that there should be a rota of carers known to the child who will take turns in providing care. This will ensure, as far as possible, that over-familiar relationships are discouraged from developing, while at the same time guarding against the care being carried out by a succession of completely different carers.

Parents/carers are involved with their child's intimate care arrangements on a regular basis; a clear account of the agreed arrangements will be recorded on the child's care plan. The needs and

wishes of children and parents are carefully considered alongside any possible constraints; e.g. staffing and equal opportunities legislation.

Each child will have an assigned senior member of staff to act as an advocate to whom they are able to communicate any issues or concerns that they may have about the quality of care they receive.

Schools often ask for clarification regarding who is responsible for providing equipment when children require changing. Parents have a role to play when their child is still wearing nappies. The parent should provide nappies, disposal bags, wipes, changing mat etc. and parents should be made aware of this responsibility. Schools are responsible for providing gloves, plastic aprons, a bin and liners to dispose of any waste

## **THE PROTECTION OF CHILDREN**

Education Child Protection Procedures and Inter-Agency Child Protection procedures are accessible to staff and adhered to.

Where appropriate, all children are taught personal safety skills carefully matched to their level of development and understanding.

If a member of staff has any concerns about physical changes in a child's presentation, e.g. marks, bruises, soreness etc. they will immediately report concerns to the designated officer for child protection. The normal procedures are then followed.

If a child becomes distressed or unhappy about being cared for by a particular member of staff, the matter is looked into and outcomes recorded. Parents/carers are contacted at the earliest opportunity as part of this process in order to reach a resolution. Staffing schedules may be altered until the issue(s) are resolved so that the child's needs remain paramount. Further advice may be taken from outside agencies if necessary.

If a child makes an allegation against a member of staff, all necessary procedures will be followed.

In the event of toileting accidents:

- All children will be treated equally and with respect and dignity;
- Two members of staff will supervise the child;
- Staff realise that children need to be reassured when toileting accidents occur and this is done with the utmost respect for the child, reflecting the needs of the child at that particular time;
- If a child should accidentally wet themselves during the day the child will be taken to the nearest toilet. (All children in the Foundation stage are asked to provide a full change of clothing which is kept in a bag on their named peg. We also have spare underwear and clothes available in school). Their change of clothes will be handed to them in the cubicle along with baby wipes and a carrier bag. Assistance will only be given if requested by the child. The child will clean and change themselves with as little fuss and embarrassment to the child as possible. If the child gets distressed or doesn't wish to get changed we will contact the parent immediately;
- In the event of a child soiling themselves and not being able to clean themselves appropriately, the parents will be contacted in order to collect the child and if appropriate return them to school.
  - Every change of clothing and toilet accident is recorded in the child's Home School Book, by the staff.

# Intimate/Personal Care Plan



<b>Child's Name:</b>	<b>Date:</b>
<b><u>Nominated Staff:</u></b>	
<b>Main areas of need:</b> (e.g. – changing nappies,)	
<b>Detailed Plan:</b> (including toileting plans, dressing or undressing and medical needs)	
Plan written by _____ Date: _____  Plan agreed with parents/carers on _____  The child's views were sought for this plan on _____  (If not, please state why not):	
<b>Signed (Headteacher)</b>	<b>Date:</b>
<b>Signed (TA, Support Staff)</b>	<b>Date:</b> <b>Date:</b> <b>Date:</b>
<b>Signed (Parent/carer)</b>	<b>Date:</b>