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**Intimate Care Policy for Children in Years 3-6**

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| **School Name:** | Larkhill Primary school | | |
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**Overview**

Larkhill Primary S chool is committed to safeguarding and promoting the wellbeing of all our children and expects our staff and volunteers to share this commitment.’

Intimate care can be defined as any care which involves washing, touching, or carrying out a procedure to intimate personal areas which most people usually carry out themselves, but which some children are unable to do because of their young age, physical difficulties, or other special needs. Intimate care can include:

* Washing & changing – dressing/undressing (underwear)
* Toileting
* Treatments such as enemas, suppositories, enteral feeds for pupils with additional needs
* Catheter and stoma care
* Supervision of a child involved in intimate self-care

**Introduction**

The Intimate Care Policy and Guidelines regarding children have been developed to ensure that:

* The health, safety, independence, and welfare of children is promoted
* The dignity and privacy of children is respected
* To safeguard children and staff
* Arrangements for intimate and personal care are open and transparent

Disabled children can be especially vulnerable. Staff involved with their intimate care need to be sensitive to their individual needs.

**Principles of Intimate Care**

The following are the fundamental principles upon which the Policy Guidelines are based:

* Pupils should be encouraged to act as independently as possible and to undertake as much of their own personal care as is possible and practicable
* Pupils are always entitled to respect and privacy and especially when in a state of undress, including, for example, when changing, toileting and showering
* Every child has the right to be safe
* Every child has the right to be valued as an individual
* Every child has the right to be treated with dignity and respect
* Every child has the right to be involved and consulted on their own intimate care to the best of their abilities
* Every child has the right to express their views on their own intimate care and to have such views considered
* Every child has the right to have levels of intimate care that are as consistent as possible

**Responsibilities**

The Principal, SENDCO or Inclusion Manager will:

* Arrange a multi-agency meeting to discuss the personal care needs of any pupil for which it is foreseeable that they will have Intimate Care Needs prior to them attending the school
* Create, in liaison with the child and parents/carers, an Individual Healthcare Plan to ensure that reasonable adjustments are made for any child with a health condition or disability (this may not be necessary for every child who has intimate care needs)
* Ensure pupils are actively consulted about their own care plan
* Ensure all staff undertaking the intimate care of children are familiar with, and understand the Intimate Care Policy
* All staff access any required training for specific types of intimate care that they carry out for pupils with additional needs.
* Ensure intimate care arrangements are agreed by the school, parents/carers, and child (if appropriate)
* Ensure intimate care arrangements for pupils with additional needs are recorded in the child’s personal file and consent forms/Intimate Care Plans signed by the parents/carers and child (if appropriate), these will be kept in a locked cupboard
* Ensure intimate care arrangements for pupils with additional needs are reviewed at least six monthly. (The views of all relevant parties, including the child (if appropriate), should be sought, and considered to inform future arrangements)
* Ensure provision is in place for occasions when key members of staff are absent (other staff are trained as a contingency)

**School staff will:**

* Work in partnership with children and parents
* Make other staff aware of the task being undertaken and if required another member of staff present
* Always explain to the pupil what is happening before a care procedure begins
* Assist them in changing themselves if they become wet, or soil themselves and help with consent if needed
* Never knowingly leave a child in wet or soiled clothing
* React to accidents in a calm and sympathetic manner
* Keep accurate records of times, staff, and any other details of incidents of intimate care on CPOMS
* Agree how often the child should be routinely changed if the child is in school for a full day, and designate a member of staff to change them (agree to a minimum number of changes)
* Encourage the child’s participation in toileting procedures wherever possible
* Discuss and take the appropriate action to respect the cultural practices of the family
* Contact parents/carers if the child refuses to be changed, or becomes distressed during the process
* Maintain excellent standards of hygiene when carrying out intimate care
* Consult with colleagues where any variation from agreed procedure/care plan is necessary
* Record the justification for any variations to the agreed procedure/care plan and share this information with the pupil and their parents/carers
* Where the child is in a changing room/toilet announce their intention of entering
* Always consider the supervision needs of the pupils and only remain in the room where their needs require this
* Wear gloves while changing a child and a fresh disposable apron if required
* Not assist with intimate or personal care tasks which the pupil is able to undertake independently

If a staff member has concerns about a colleague’s intimate care practice, they must report this to the Headteacher. In the event of the staff member being the headteacher, please contact the CEO.

**Swimming**

Some year groups participate in swimming. Children are entitled to respect and privacy when changing their clothes however, there must be the required level of supervision to safeguard young people in regard to health and safety considerations and to ensure that bullying, teasing or other unacceptable behaviour does not occur. Where a child needs additional support for changing, parental permission will be sought, and a personal care plan will be drawn up so as to maintain dignity but increase independence.

**Parents will:**

* Advise staff of the intimate care needs of their child
* Change their child, or assist them in going to the toilet at the latest possible time before coming to school
* Provide spare nappies/incontinence pads, wet wipes, and a change of clothes in case of accidents
* Read and sign this policy to ensure they understand the policies and procedures around intimate care
* Inform the school should their child have any marks/rashes
* Discuss with the school how often their child will need to be changed, and who will do the changing
* Work with the school to develop their child’s independence where appropriate

**Guidelines for Good Practice**

When assistance is required, this should normally be undertaken by one member of staff, they may be accompanied by another appropriate adult who is aware of the task to be undertaken. This person will be visible and/or audible. Intimate or personal care procedures should not involve more than one member of staff unless the pupil’s care plan specifies the reason for this.

Adults must not administer intimate care behind a closed door with a pupil.

Adults will let another adult know where they are and what they are doing.

A CPOMS record should be kept of all intimate and personal care tasks undertaken and, where these have been carried out in another room, should include times left and returned. Any vulnerability, including those that may arise from a physical or learning difficulty should be considered when formulating the individual pupil’s care plan. Involve the child in their intimate care. Try to encourage a child’s independence as far as possible in his/her intimate care. Where the child is fully dependent, talk with them about what is going to be done and give them choice where possible.

Check your practice by asking the child/parent any likes/dislikes while carrying out intimate care and obtain consent. 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 (a child can have multiple carers; a consistent approach to care is important). Effective communication with parents/carers ensures practice is consistent. Be aware of your own limitations – only carry out care activities you understand and feel competent and confident to carry out. If in doubt, ASK. Some procedures must only be carried out by staff who have been formally trained and assessed.

Promote positive self-esteem and body image. Confident, self-assured children who feel their body belongs to them are less vulnerable. The approach you take to intimate care can convey lots of messages to a child about their body worth. Your attitude to a child’s intimate care is important. If you have any concerns, you must report them. If you observe any unusual markings, discolouration or swelling including the genital area, complete a safeguarding report and immediately give it to the Designated Safeguarding Lead and record on CPOMs. If during the intimate care of a child you accidentally hurt them, or the child appears to be sexually aroused by your actions, or misunderstands or misinterprets something, reassure the child, ensure their safety, and report the incident immediately to your Designated Safeguarding lead and record on CPOMs. Report and record any unusual emotional or behavioural response by the child. Parents/carers are to be informed about concerns (see school Safeguarding Policy).

Incidences of one-off intimate care will be recorded on a miscellaneous sheet. This record sheet is kept in the safeguarding file in each classroom.

**Communication with Children**

It is the responsibility of all staff caring for a child to ensure that they are aware of the child’s method and level of communication. Children communicate using different methods, e.g., words, signs, symbols, body movements, eye pointing. Make eye contact at the child’s level. Use simple language and repeat if necessary. Wait for response. Continue to explain to the child what is happening even if there is no response. Treat the child as an individual with dignity and respect.

**Monitoring, Evaluation and Review**

The school will review this policy annually and assess its implementation and effectiveness.