**MOORTHORPE PRIMARY SCHOOL WITH INCLUSION RESOURCE**



**Intimate Care Policy**

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| **Reviewed annually:** |  | September 2024 (no changes) |
| **Approved:** |  | Governing Body September 2021 |

*Introduction*   
 Intimate care is any care which involves washing, touching or carrying out an   
 invasive procedure (such as cleaning up a pupil after they have soiled themselves)   
 to intimate personal areas. In most cases, such care will involve cleaning for hygiene   
 purposes as part of a staff member’s duty of care. In the case of a specific   
 procedure, only a person suitably trained and assessed as competent should   
 undertake the procedure.   
   
 The issue of intimate care is a sensitive one and will require staff to be respectful of   
 the child’s needs. The child’s dignity should always be preserved with a high level of   
 privacy, choice and control. There shall be a high awareness of child protection   
 issues. Staff behaviour must be open to scrutiny and staff must work in partnership   
 with parents/carers to provide continuity of care to children/young people wherever   
 possible.   
   
 Moorthorpe Primary 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. Moorthorpe Primary School recognises that there is a need to treat all children   
 with respect when intimate care is given. No child should be attended to in a way   
 that causes distress or pain.   
   
 *Our Approach to Best Practice*   
 The management of all children with intimate care needs will be carefully planned.   
 The child who requires intimate care is treated with respect at all times; the child’s   
 welfare and dignity is of paramount importance. Staff who provide intimate care are   
 trained to do so (including Child Protection and Health and Safety training as   
 needed for specific pupils with statements /disabilities) and are fully aware of best   
 practice. Apparatus will be provided to assist with children who need special   
 arrangements following assessment from physiotherapist/occupational therapist 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/young people will not usually be involved with the delivery of sex   
 education to the children/young people in their care as an additional safeguard to   
 both staff and children/young people involved. Exceptions may be made for pupils   
 with learning disabilities with parental consent/agreement.   
   
 The child will be supported to achieve the highest level of autonomy that is possible   
 given their age and abilities. Staff will encourage each child to do as much for   
 him/herself as he/she can. This may mean, for example, giving the child   
 responsibility for washing themselves. Individual intimate care plans will be drawn   
 up for particular children as appropriate to suit the circumstances of the child.

Each child’s right to privacy will be respected. Careful consideration will be given to   
 each child’s situation to determine how many carers might need to be present when   
 a child is toileted. Where possible, one child will be catered for by one adult unless   
 there is a sound reason for having more adults present. If this is the case, the   
 reasons should be clearly documented. Wherever possible the same child will not   
 be cared for by the same adult on a regular basis; ideally there will 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,   
 whilst at the same time guarding against the care being carried out by a succession   
 of completely different carers.   
   
 Intimate care arrangements will be discussed with parents/carers on a regular   
 basis and recorded on the child’s care plan. The needs and wishes of children   
 and parents will be considered wherever possible within the constraints of   
 staffing and equal opportunities legislation.   
   
 *The Protection of Children*   
 Education Child Protection Procedures and Inter-Agency Child Protection   
 procedures will be adhered to. All children will be 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 s/he will immediately report concerns to the appropriate   
 manager/designated person for child protection. If a child becomes distressed or   
 unhappy about being cared for by a particular member of staff, the matter will be   
 looked into and outcomes recorded. Parents/carers will be contacted at the earliest   
 opportunity as part of this process in order to reach a resolution. Staffing schedules   
 will be altered until the issue(s) are resolved so that the child’s needs remain   
 paramount. Further advice will be taken from outside agencies if necessary. If a   
 child makes an allegation against a member of staff, all necessary procedures will   
 be followed.   
   
   
 *Nappies & pull ups*   
 Schools may have concerns regarding Child Protection issues when they are   
 asked by parents to admit a child who is still wearing nappies. Child Protection need   
 not present an issue. It is good practice to provide information for parents of the   
 policy and practice in the school. Such information should include a simple   
 agreement form for parents to sign outlining who will be responsible, within the   
 school, for changing the child and when and where this will be carried out. This   
 agreement allows the school and the parent to be aware of all the issues   
 surrounding this task right from the outset. A note book to record who changes the   
 child, how often this task is carried out and the time they left /returned to the   
 classroom following his task will be kept.

*Changing Facilities*

Children who have long-term incontinence will require specially adapted facilities. The dignity and privacy of the child should be of paramount concern. Consideration is given to the sighting of this area from a health and safety aspect. In Foundation Stage, a changing mat will have to be used on the floor when a child is being changed. This method of changing child is recommended, as it avoids having to lift a child and cause possible back injury.   
   
 *Equipment Provision*   
 Parents have a role to play when their child is still wearing nappies. The parent   
 should provide nappies, disposal bags, wipes; etc. Parents should be made aware   
 of this responsibility. The school is responsible for providing gloves, plastic aprons,   
 equipment, cleaning wipes, a bin and liners to dispose of any waste. We do have a   
 supply of sensitive wipes if needed?  
   
 *Health and Safety*   
 Staff should wear a plastic apron and gloves when dealing with a child who is   
 bleeding or soiled or when changing a soiled nappy. Any soiled waste should be   
 placed in a polythene waste disposal bag, which can be sealed. This bag should   
 then be placed in a bin (complete with liner) which is specifically designated for the   
 disposal of such waste (we have a nappy bin). The bin should be emptied on a regular  
 basis and it can be collected as part of the usual refuse collection service as this waste   
 is not classed as clinical waste. Staff should be made aware of the school’s Health and   
 Safety Policy.   
   
 *Special Needs*   
 Children with special needs have the same rights to safety and privacy when   
 receiving intimate care. Additional vulnerabilities that may arise from a physical   
 disability or learning difficulty must be considered with regard to individual teaching   
 and IEPs for each child. As with all arrangements for intimate care needs,   
 agreements between the child, those with parental responsibility and the school   
 should be easily understood and recorded. Parents of pupils with regular   
 soiling/wetting will be encouraged to leave a change of clothes in school for the use   
 of their child. Regardless of age and ability, the views and/or emotional responses of   
 children with special needs should be actively sought (with advocacy arrangements   
 made for those who can’t) in regular reviews of these arrangements.   
   
   
 All staff engaged in the care and education of children need to exercise   
 caution in the use of physical contact. The expectation is that staff will work in   
 “limited touch” cultures and that when physical contact is made with pupils this will   
 be in response to the pupil’s needs at the time, will be of limited duration and will be   
 appropriate given their age, stage of development and background. Staff should be   
 aware that even well intentional physical contact might be misconstrued directly by   
 the child, an observer or by anyone the action is described to. Staff must therefore   
 always be prepared to justify actions and accept that all physical contact be open to   
 scrutiny. Physical contact which is repeated with an individual child or young person   
 is likely to raise questions unless the justification for this is formally agreed by the child,

the organisation and those with parental responsibility. Children with special needs may require more physical contact to assist their everyday learning.   
 The general culture of “limited touch” will be adapted where appropriate to the   
 individual requirements of each child. The arrangements must be understood and   
 agreed by all concerned, justified in terms of the child’s needs, consistently applied   
 and open to scrutiny. Wherever possible, consultation with colleagues should take   
 place where any deviation from the arrangements is anticipated. Any deviation and   
 the justification for it should be documented and reported. Extra caution may be   
 required where a child has suffered previous abuse or neglect. In the child’s view,   
 physical contact might be associated with such experiences and lead to staff   
 vulnerable to allegations of abuse. Additionally, many such children are extremely   
 needy and seek out inappropriate physical contact. In such circumstances staff   
 should deter the child without causing them a negative experience. Ensuring that a   
 witness is present will help to protect staff from such allegations, wherever possible.   
   
 *First Aid and Intimate Care*   
 Staff who administers first aid should ensure wherever possible that another   
 adult or other children are present. The pupil’s dignity must always be considered   
 and where contact of a more intimate nature is required (e.g. assisting with toileting   
 or the removal of wet/soiled clothing) another member of staff should be in the   
 vicinity and should be made aware of the task being undertaken. Regular   
 requirements of an intimate nature should be planned for. Agreements between the   
 school, those with parental responsibility and the child concerned should be   
 documented and easily understood. The necessity for such requirements should be   
 reviewed regularly. The child’s views must also be actively sought and, in particular,   
 any discomfort with the arrangements addressed. A letter of agreement will be   
 required between school and those with parental responsibility.

*Procedure for changing/cleaning children*   
 Where?   
  
 Foundation Stage staff bathroom/shower room or if an older child: the disabled toilet in KS2

Procedure   
  
Promote independence   
  
 Support independence   
  
 Adult to change and clean child

Equipment to use   
  
 Plastic aprons   
  
 Gloves   
  
 Non-allergic wet-wipes   
  
 Nappy sacks for soiled wipes (place in special bin)   
  
 Nappy sacks for soiled underwear/clothes   
  
 Soil bin   
  
 Alcohol gel   
  
 Note to be sent home   
  
 Record of incident

Dear Parent/Carer,   
   
 Your child currently wears nappies/soils/wets regularly.   
 We will support your child in developing independence in changing/cleaning   
 themselves.   
   
 Attached is our Intimate Care Policy for you to read. Please sign and return   
 the slip.   
   
 Yours sincerely   
 Mrs. D Birdsall   
 Headteacher

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Child’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   
   
 I have read the Intimate Care Policy and agree to my child being supported to   
 develop independence in changing/cleaning themselves.   
   
   
 Parent’s signature …………………………………………………. □

Dear Parent/Carer   
   
   
 Your child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ soiled/wet themselves   
 today.   
   
 They changed their clothes independently   
 They changed their clothes with adult support   
 They were changed by an adult   
   
 In accordance with our policy the incident has been recorded.   
 In your child’s bag you will find soiled/wet clothes. Would you kindly wash and return   
 any of the school’s clothes loaned to your child.   
 Thank you.   
 Yours sincerely   
   
   
   
   
 Class Teacher

These letters are generally not used as staff speak to parents/carers in person.