



Intimate Care Policy

This policy must be read alongside the Warmley Park School Safeguarding Policy.

Definition of Intimate Care

Intimate Care is defined as care tasks of an intimate nature associated with bodily functions, body products, medication, medical intervention and personal hygiene which require direct or indirect contact with, or exposure to the body of a pupil.

Principles

- All pupils have the right to be safe and treated with dignity and respect at all times.
- All pupils have the right to personal privacy
- All pupils have the right to be involved and consulted as part of their intimate care

Careful consideration is given to the needs of each pupil to determine how many staff need to be present when supporting a pupil with intimate care. Wherever possible this should be one member of staff unless otherwise specified on the care plan, for example, for reasons of safe handling.

Intimate care routines

1. Prior to starting an intimate care routine
 - Ensure that the pupil knows you and you know them. Be aware of their care plan.
 - Remove them from class discretely.
 - Inform the pupil that they are going to have intimate care and where they are going to have it using their relevant communication strategy and vocabulary.
 - Check the area is safe and is comfortable in terms of privacy and air temperature.
 - Check that you have the necessary equipment ready, water is of a suitable temperature, and if used, the changing bed is wiped down before starting.
2. During an intimate care routine
 - Inform the pupil of each stage of the process getting them to do as much as they can for themselves
 - Refer to body parts by their anatomically correct name.

- Neither rush, nor take too long over the process.
 - If there are any concerns do not continue with the process. If necessary, take the pupil back to class and seek advice from a Designated Safeguarding Lead.
3. After an intimate care routine
- Tell the pupil when the process is finished
 - Dispose of any items as appropriate in a sani bin. Do not flush anything other than toilet paper.
 - If clothing is soiled, place in a plastic bag, tie it and put in the pupil's bag to be sent home.
 - Return the pupil to class discretely.
 - Complete the intimate care record for the pupil.

Staff are expected to inform pupils of the process and talk them through what is happening, encouraging them to be as independent as possible, and to do as many aspects of the care as is appropriate for themselves.

Staff should not undertake any aspect of intimate care that has not been agreed between the school and parents, also taking into consideration the opinions of the pupil.

Staff should not have any form of device including a mobile phone when attending to the intimate care needs of a pupil.

Staff should ensure that they feel confident to carry out an intimate care routine before they start. This includes:

- Training on safe handling of children.
- Understanding of items used for hygiene purposes - gloves, aprons, pads or nappies, wipes, anti-bacterial spray for wiping down a bed afterwards.
- Understanding of the communication strategy used by the pupil - each part of the process should be talked through with the pupil.
- Understanding of any behaviour that could present during the routine.
- Training for specific procedures including catheterisation and administration of rectal medication will be identified and should not be carried out unless staff are signed off as competent.
- Awareness of safe disposal of soiled items.

If any member of staff does not feel confident about any aspect of intimate care they need to discuss this with their line manager.

Staff should always inform others in their class team before they take a pupil to a bathroom, toilet, or changing room for an intimate care routine.

Students and volunteers should never be involved in intimate care.

Supply staff will have undergone safeguarding checks to be working at Warmley Park School and these will be logged on the Single Central Record. They should only be involved in intimate care routines where they are supporting the process, such as for safe handling. In the case of long term supply staff the Headteacher may agree to them leading on intimate care routines once they have completed internal safeguarding training, and safe handling training where applicable.

There is no legislation that states that male and female staff should not be involved in the intimate care of pupils of either gender. However we recognise that there are sensitivities involved. Parents or pupils may request a same sex member of staff to support their intimate care needs.

Intimate care routines including dressing and undressing, toileting, and washing should be covered as part of the PSHE curriculum so that pupils develop their understanding of how to keep themselves safe and develop their independence.

Having accidents with continence is a developmental stage to achieving independence. Pupils must be reassured that it is not their fault to avoid embarrassment.

Whilst pupils should not be rushed during intimate care routines, staff should not take unnecessary time to carry out the routine.

Pupils should never be left alone on a changing bed so all the relevant equipment needs to be collected before the pupil is moved onto the bed.

Pupils should have their own personal hygiene items labelled and stored safely in their locker or in a bathroom.

When attending to intimate care routines outside of school, that is, in the community, a risk assessment will be carried out to ensure that the process can be completed safely, whilst maintaining dignity and respect.

Safeguarding

If concerns arise during an intimate care routine, the Designated Safeguarding Lead must be informed. This could include concerns about the pupil's physical wellbeing, response to the routine, behaviour or arousal.

If staff have any concerns about the actions of other staff they have a responsibility to report it to a Designated Safeguarding Lead immediately.

If a pupil makes an allegation this must be reported to a Designated Safeguarding Lead immediately.

Safeguarding Process

If you have concerns or a child or young person makes a disclosure, do not delay in reporting it immediately to a Designated Safeguarding Lead – Marian Lovell, Ellie Goodson, Lisa Parker or Shaun Payne. It is the responsibility of only the Police or Social Care to investigate. The most appropriate course of action will be taken by the Designated Safeguarding Lead which may involve reporting it to Social Care, and the Police, and seeking medical advice and treatment.

Guidelines for Good Practice with Intimate Care.

Put yourself in their situation- how would you expect intimate care to be done to you.

Treat every pupil with dignity and respect, and ensure privacy consistent with the age of the pupil and the situation. Where appropriate the member of staff carrying out the personal care should be chosen by the pupil and they must be known to the pupil.

Involve the pupil as far as possible in their own intimate care- know what they can do for themselves, ask if they are comfortable, give them time to respond

Be responsive to the pupil's reactions. If the pupils expresses hesitation or discomfort, pause and try to ascertain why they are reacting like this.

Make sure intimate care practice is consistent. The procedures should be the same each time unless there is a reason to change them.

Never do something unless you know how to do it. You are putting the pupil and yourself at risk. Training and certifying as competent is essential prior to carrying out a process including hoisting.

Report any concerns including how the pupil reacts physically or communicates during the intimate care process. This includes if you accidentally hurt them, they become aroused, their genitals are sore, they misunderstand something that you do, they are emotional during intimate care. Additionally record if you notice a difference directly before or after intimate care.

Encourage the pupil to have a positive image of his or her own body. Confident, assertive pupils who feel that their body belongs to them are less vulnerable to abuse. Intimate care should be relaxed and caring.

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