



Woodston Primary School

Intimate Care Policy

1.0 INTRODUCTION

1.1 Staff who work with young children or children/young people who have special needs will realise that the issue of intimate care is a difficult one and will require staff to be respectful of children's needs.

1.2 Intimate care can be 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 incontinence and menstrual management as well as more ordinary tasks such as help with washing or bathing.

1.3 Children's dignity will be preserved and a high level of privacy, choice and control will be provided to them. Staff who provide intimate care to children have a high awareness of child protection issues. Staff behaviour is open to scrutiny and staff at Woodston Primary School work in partnership with parents/Carers to provide continuity of care to children/young people wherever possible.

1.4 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. This work is shared with parents who are encouraged to reinforce the personal safety messages within the home.

1.5 Woodston 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. Woodston 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.

2.0 OUR APPROACH TO BEST PRACTICE

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

2.2 Staff who provide intimate care are trained to do so (including Child Protection and 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 therapist as required.

2.3 Staff will be supported to adapt their practice in relation to the needs of individual children

taking into account 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 and relationship education to their children/young people as an additional safeguard to both staff and children/young people involved.

2.4 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 is aware of each procedure that is carried out and the reasons for it.

2.5 As a basic principle, children 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 themselves as they 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. These plans include a full risk assessment to address issues such as moving and handling, personal safety of the child and of the carer (Appendix 1).

2.6 Each child's right to privacy will be respected. When carrying out intimate care for a child, two adults will always be present. All intimate care will be recorded each time it takes place (Appendix 2). If age appropriate, an agreement between the child and staff will be completed (Appendix 4).

2.7 Parents/carers will give permission and be 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 (Appendix 3 & 5). The needs and wishes of children and parents will be carefully considered alongside any possible constraints; e.g. staffing and equal opportunities legislation.

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

3.0 THE PROTECTION OF CHILDREN

3.1 Child Protection and Safeguarding procedures will be accessible to staff and adhered to.

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

3.3 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/ a Designated Safeguarding Lead for Child Protection. A clear record of the concern will be completed on My Concern and referred to Children's Social Care and/or the Police if necessary. Parents will be asked for their consent or informed that a referral is necessary prior to it being made unless doing so is likely to place the child at greater risk of harm.

3.4 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. In the event of the absence of key

members of staff the school will provide an alternative member of staff subject to the conditions above.

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

This policy was ratified by the Governing body in January 2022 and will be reviewed every two years (or earlier if required).

Appendix 1 - Intimate care risk assessment (adapted as needed for each child)



Name of child: _____

Date completed: _____

Date of Review: _____ (or earlier if needed)

Signed: _____ (Parent/Carer)

Name: _____ Relationship to child: _____

Hazard	Risks	Risk level (H.M.L)	Precautions Needed	Risk Level Achieved (H.M.L)	Additional Action Needed
Trips, slips, falls	Major or minor risk to staff and children.	M	Toileting protocol in place and owned by all staff. Spillages of urine or faeces dealt with promptly.	L	Protocol followed. Spillage equipment available.
Health risks	Health risks to pupils and staff e.g. infection, diarrhoea, vomiting.	M	Protocol in place and owned by all staff. All staff trained in good hygiene practice. Staff aware of infection/health risks.	L	Protocol reviewed regularly and all staff receive refresher training.
Manual Handling	Major or minor risk of injury to staff and pupils.	M	Risk assessment in place. Staff training undertaken.	L	Staff members attend refresher training at regular intervals.
Inadequate changing facilities	Health and safety risk to staff and pupils.	M	See Accessibility Plan. Protocol in place. Good hygiene practice, regular disinfecting of area. Privacy and dignity of pupil maintained.	L	
Child protection (CP)	Injury to pupil or allegations against staff.	L	All staff members receive annual CP training and aware of best practice. All	L	

			staff DBS checked. Protocol in place.		
Equipment failure	Injury to pupil or staff.	L	Regular equipment maintenance by a competent adult. Regular staff checks. Faults reported.		
Fire	Injury or death.	M	H&S policy in place. Advice from Fire Service about safe practices and refuge areas.	L	Regular fire drills. All staff and pupils aware of fire safety procedures.

Appendix 2 - Record of intimate care intervention

Name of child: _____

Class/ Year Group: _____

Name of Support Staff Involved: _____

Date	Time	Procedure	Staff signature	Second signature

Appendix 3 - Toilet management plan



Child's Name _____

Class/Year Group _____

Name of Support Staff Involved _____

Date of Record _____ Review Date _____

Area of Need:	
Equipment required:	
Location of suitable toilet facilities:	
Support required:	Frequency of support:

Working towards Independence

Child will try to	Personal Assistant will	Target achieved (date)

Signed _____ Parents/Carers

Signed _____ Member of Staff

Signed _____ Second Member of

Staff Signed _____ Child (if appropriate)

Appendix 4 - Agreement between child and staff member(s)



Child's Name _____

Class/Year Group _____

Name of Support Staff Involved _____

Date _____ Review Date _____

Support Staff

As the adult helping you in the toilet you can expect me to do the following:

- When I am the identified person I will stop what I am doing to help you in the toilet. I will avoid all unnecessary delays.
- When you use our agreed emergency signal, I will stop what I am doing and come and help.
- I will treat you with respect and ensure privacy and dignity at all times.
- I will ask permission before touching you or your clothing.
- I will check that you are as comfortable as possible, both physically and emotionally.
- If I am working with a colleague to help you, I will ensure that we talk in a way that does not embarrass you.
- I will look and listen carefully if there is something you would like to change about your Toilet Management Plan.

Child

As the child who requires help in the toilet you can expect me to do the following:

- I will try, whenever possible, to let you know a few minutes in advance, that I am going to need the toilet so that you can make yourself available and be prepared to help me.
- I will try to use the toilet at break time or at the agreed times.

- I will only use the agreed emergency signal for real emergencies.
- I will tell you if I want you to stay in the room or stay with me in the toilet.
- I will tell you straight away if you are doing anything that makes me feel uncomfortable or embarrassed.
- I may talk to other trusted people about how you help me. They too will let you know what I would like to change.

Signed _____ Member of Staff

Signed _____ Member of Staff

Signed _____ Child (if appropriate)

Appendix 5 - Permission for school to provide intimate care



Child's Full Name: _____ Male/Female

Date of Birth: _____

Parent/Carer's Full Name: _____

Address:

I give permission to Woodston Primary School to provide appropriate intimate care support to my child e.g. changing soiled clothing, washing and toileting.

I will advise the medical lead of any medical complaint my child may have which affects issues of intimate care.

Signed _____

Full Name _____

Relationship to Child _____

Date _____