



Intimate Care Policy
July 2024

Our Vision

(Where we want to be)

Spring Hill School is at the heart of our community and everything we do is based around the needs of our children and their families. We provide children with the best possible education through an irresistible, ambitious curriculum, high quality teaching including opportunities and experiences which together promote excellence in both behaviour and learning.

The school environment is one where children thrive academically and it effectively equips them with the necessary life skills, attributes, knowledge and understanding they need for an ever-changing world in which they contribute successfully to society.

Our Mission

(What we are doing to get there)

Spring Hill instils a passion for learning for the whole school family through enquiring minds and caring hearts to achieve personal excellence. We find opportunities to continually improve for the future in a caring and inclusive environment which promotes co-operative, respectful and nurturing relationships, where all school life is safe and fun.

Our Aims

(What we want to provide for everyone in our family)

- To foster mutually beneficial relationships with parents, the wider community and professionals with a focus on continuous improvement.
- To promote and develop life-long habits for a healthy body and healthy mind.
- To provide a curriculum that is relevant to the context of the school and its community
- To raise aspirations through high expectations and fostering self-belief so that children flourish and lead successful and happy lives.
- To create an environment which recognises and nurtures unique gifts, curious minds, develops talents and personalities.
- To provide learning experiences and opportunities which create awe and wonder and develop a love of learning – leading to lifelong learners
- To create leaders of learning across the school family, who take risks, thrive on challenge, and bounce back.
- To provide a safe and secure environment where everyone is valued, respected, and accepted.
- To develop citizens of the future who positively contribute to society, serving their community and beyond.

Our Values

(What is really important to us)

Responsibility Aspirational Inclusivity Service Empowerment

We RAISE!

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About this Document:

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1. Aims

This policy aims to ensure that:

- › Intimate care is carried out properly by staff, in line with any agreed plans or consent
- › The dignity, rights and wellbeing of children are safeguarded
- › Pupils with intimate care difficulties are not discriminated against, in line with the Equalities Act 2010
- › Parents are assured that staff are knowledgeable about intimate care and that the needs of their children are taken into account
- › Staff carrying out intimate care work do so within guidelines (i.e. health and safety, manual handling, safeguarding protocols awareness) that protect themselves and the pupils involved

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, (e.g. the administration of rectal diazepam). This type of procedure should also be accompanied by a medical plan.

2. Legislation and statutory guidance

This policy complies with [statutory safeguarding guidance](#).

Summary

Toileting

If a child has soiled themselves, it is essential Academy staff protect the child (and themselves) by:

1. Phoning the parent/carer for permission to clean/change the child. If the parent/carer refuses, they must come to the Academy straight away to manage the situation.
2. Two adults are involved in the process if the parent/carer gives permission (one to clean and the other to stand by the door to manage privacy).
3. Depending on the age of the child – the child should have autonomy at all times.
4. The situation must be dealt with in toilet facilities.

In the case of supporting a child who requires regular toileting, Spring Hill have a Toilet Management Plan which is completed prior to support taking place (APPENDICES 1-3). If the toilet management plan has been agreed and signed by parents and staff, it is acceptable for two members of staff to assist a child unless there is an implication for safe moving and handling of the child.

3. Role of parents

3.1 Seeking parental permission

For children who need routine or occasional intimate care (e.g. for toileting or toileting accidents), parents will be asked to sign a consent form.

For children whose needs are more complex or who need particular support outside of what's covered in the permission form, an intimate care plan will be created in discussion with parents (see section 3.2 below).

Where there isn't an intimate care plan or parental consent for routine care in place, parental permission will be sought before performing any intimate care procedure.

If the school is unable to get in touch with parents and an intimate care procedure urgently needs to be carried out, the procedure will be carried out to ensure the child is comfortable, and the school will inform parents afterwards.

3.2 Creating an intimate care plan

Where an intimate care plan is required, it will be agreed in discussion between the school, parents, the child (when possible) and any relevant health professionals.

The school will work with parents and take their preferences on board to make the process of intimate care as comfortable as possible, dealing with needs sensitively and appropriately.

Subject to their age and understanding, the preferences of the child will also be taken into account. If there's doubt whether the child is able to make an informed choice, their parents will be consulted.

The plan will be reviewed twice a year, even if no changes are necessary, and updated regularly, as well as whenever there are changes to a pupil's needs.

See appendix 1 for a blank template plan to see what this will cover.

3.3 Sharing information

The school will share information with parents as needed to ensure a consistent approach. It will expect parents to also share relevant information regarding any intimate matters as needed.

4. Role of staff

4.1 Which staff will be responsible

All staff at the school who carry out intimate care will have been subject to an enhanced Disclosure and Barring Service (DBS) with a barred list check before appointment, as well as other checks on their employment history.

4.2 How staff will be trained

Staff will receive:

- Training in the specific types of intimate care they undertake
- Regular safeguarding training
- If necessary, manual handling training that enables them to remain safe and for the pupil to have as much participation as is possible

They will be familiar with:

- The control measures set out in risk assessments carried out by the school
- Hygiene and health and safety procedures, including those related to COVID-19

They will also be encouraged to seek further advice as needed.

5. Intimate care procedures

5.1 How procedures will happen

It is best practice from a health and safety and safeguarding perspective to have 2 members of staff present. We accept that this is not always possible. Staff may carry out intimate care procedures alone and record this on CPOMS.

Staff must log on a written form in the changing areas. They must log the 2 staff members name that were present, the date and time and any visible marks/notes.

If there is a known risk of false allegations by a pupil, or if it is an invasive procedure 2 members of staff are always present.

Procedures will be carried out in the designated areas. i.e. disable toilets/ EYFS toilets/changing Room in EYFS.

Procedures will be carried out in a COVID-safe way according to the school's risk assessment and COVID-19 protocol.

When carrying out procedures, the school will provide staff with:

Protective disposable gloves, disposable aprons, cleaning supplies, changing mats and bins.

For pupils needing routine intimate care, the school expects parents to provide, when necessary, a good stock (at least a week's worth in advance) of necessary resources, such as nappies, underwear and/or a spare set of clothing.

Any soiled clothing will be contained securely, clearly labelled, and discreetly returned to parents at the end of the day.

5.2 Concerns about safeguarding

If a member of staff carrying out intimate care has concerns about physical changes in a child's appearance (e.g. marks, bruises, soreness), they will report this using the school's safeguarding procedures and report to parents on the same day.

If a child is hurt accidentally or there is an issue when carrying out the procedure, the staff member will report the incident immediately to the Designated Safeguarding Lead.

If a child makes an allegation against a member of staff, the responsibility for intimate care of that child will be given to another member of staff as quickly as possible and the allegation will be investigated according to the school's safeguarding procedures.

6. Monitoring arrangements

This policy will be reviewed by the Designated Safeguarding Lead annually. At every review, the policy will be approved by the Headteacher.

7. Links with other policies

This policy links to the following policies and procedures:

- Accessibility plan
- Child protection and safeguarding
- COVID-19
- Health and safety
- SEN
- Supporting pupils with medical conditions

Any intimate care plans and permissions must be logged on CPOMS

The governing body reviews this policy every two years. The governors may, however, review the policy earlier than this, if the government introduces new regulations, or if the governing body receives recommendations on how the policy might be improved.

Appendix 1

Parental Permission for Staff to Provide Intimate Care

I understand that:

- I give permission to the Academy to provide appropriate intimate care support to my child e.g. changing soiled clothing, washing and toileting;
- I will advise the Head Teacher of any medical reason my child may have which affects issues of intimate care;
- I understand that the intimate care provided for my child at Academy will be given by familiar members of staff;
- I understand that the members of staff providing the care for my child have had appropriate training, including in Child Protection.

Parent/Carer Name: _____

Signature: _____

Relationship to child: _____

Date: _____

Child's Name: _____

Class: _____

Date of birth: _____

Appendix 2

Toilet Management Plan – Agreement between Staff and Child

Child's name: _____

Date of Birth: _____

Support Staff/Class Teacher

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

- I will stop what I am doing to help you in the toilet as soon as you ask me;
- I will avoid all unnecessary delays;
- When you use our emergency agreed 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.

Child

As the child who needs 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 need to go to the toilet, so that you can come and 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 will work with you to practice the things I need to do to become more independent in using the toilet.

We will review this agreement on:

Signed: Child (if appropriate): _____

Support staff/CT involved: _____

Date: _____