

Intimate care and toileting policy

Bonnygate Primary School



Approved by:

Laura Spencer

Date: 31st January 2024

Last reviewed on:

December 2023

Next review due by:

January 2025

T. MS

Contents

| | |
|--|---|
| 1. Aims | 2 |
| 2. Legislation and statutory guidance | 2 |
| 3. Role of parents | 2 |
| 4. Role of staff..... | 3 |
| 5. Intimate care procedures | 3 |
| 6. Monitoring arrangements..... | 4 |
| 7. Links with other policies..... | 4 |
| Appendix 1: template intimate care plan | 5 |
| Appendix 2: template parent/carer consent form | 7 |

1. Aims

This policy aims to ensure that:

- › Intimate care is carried out properly by staff, in line with any agreed plans
- › 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 refers to any care which involves toileting, washing, changing, touching or carrying out an invasive procedure to children’s intimate personal areas.

2. Legislation and statutory guidance

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

It also complies with our funding agreement and articles of association.

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 (if used), 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 once 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

It will usually be an LSA or, occasionally, an MDA who would carry out intimate care needs. This will be in agreement with the member of staff and the parents/carers of the child concerned.

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

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

5. Intimate care procedures

5.1 How procedures will happen

The designated practitioner who provides the care (in most cases the LSA) forms a strong, trusting relationship with the child. They ensure that it is a positive experience that is safe and comfortable for all. Consent is obtained from the parent/carer for intimate care to be undertaken.

The child is encouraged to undertake as much of the procedure for themselves as possible, including washing intimate areas, dressing/undressing and hygiene.

The early years toilet area is used where a shower is available to attend to a child's needs and every effort is made to ensure privacy and modesty. If a shower is not required, changing takes place in the toilet in Reception, where there is a changing area. The door can be closed to ensure privacy, but is not a floor to ceiling door so safeguarding can be maintained. There is a special bin to dispose of soiled nappies hygienically. Parents are expected to provide changing materials for their child, thus reducing any risk of allergies from unfamiliar products.

Two practitioners should be present when a child needs help with intimate care. The school will work alongside other agencies e.g. Health, where applicable.

If a child is unhappy or anxious about the care being provided, the issue will be addressed to ensure that we continually meet a child's needs.

When carrying out procedures:

- A clean disposable apron and gloves is worn every time a child is changed, after having washed their hands thoroughly.
- Whilst changing, children's skin is cleaned with a disposable wipe if needed.
- Nappies and 'pull ups', gloves, aprons and wipes are disposed of hygienically and safely by double bagging and placing in a special bin.
- If any member of staff notices any marks or injuries on a child while they are being changed, normal safeguarding procedures should be followed.

We dispose of our waste in accordance with the Department of Health and Thurrock Council.

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.

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 a member of the Senior Leadership team.

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 Inclusion Manager/SENDCo, annually. At every review, the policy will be approved by the governing body.

7. Links with other policies

This policy links to the following policies and procedures:

- Accessibility plan
- Child protection and safeguarding
- Health and safety
- SEN

› Supporting pupils with medical conditions

Appendix 1: template intimate care plan

| PARENTS/CARERS | |
|---|--|
| Name of child | |
| Type of intimate care needed | |
| How often care will be given | |
| What training staff will be given | |
| Where care will take place | |
| What resources and equipment will be used, and who will provide them | |
| How procedures will differ if taking place on a trip or outing | |
| Name of senior member of staff responsible for ensuring care is carried out according to the intimate care plan | |
| Name of parent or carer | |
| Relationship to child | |
| Signature of parent or carer | |
| Date | |
| CHILD | |
| How many members of staff would you like to help? | |
| Do you mind having a chat when you are being changed or washed? | |
| Signature of child | |
| Date | |

This plan will be reviewed twice a year.

Next review date:

To be reviewed by:

Appendix 2: template parent/carer consent form

| PERMISSION FOR SCHOOL TO PROVIDE INTIMATE CARE | |
|---|--------------------------|
| Name of child | |
| Date of birth | |
| Name of parent/carer | |
| Address | |
| I give permission for the school to provide appropriate intimate care to my child (e.g. changing soiled clothing, washing and toileting) | <input type="checkbox"/> |
| I will advise the school of anything that may affect my child's personal care (e.g. if medication changes or if my child has an infection) | <input type="checkbox"/> |
| I understand the procedures that will be carried out and will contact the school immediately if I have any concerns | <input type="checkbox"/> |
| <p>I do not give consent for my child to be given intimate care (e.g. to be washed and changed if they have a toileting accident).</p> <p>Instead, the school will contact me or my emergency contact and I will organise for my child to be given intimate care (e.g. be washed and changed).</p> <p>I understand that if the school cannot reach me or my emergency contact if my child needs urgent intimate care, staff will need to provide this for my child, following the school's intimate care policy, to make them comfortable and remove barriers to learning.</p> | <input type="checkbox"/> |
| Parent/carer signature | |
| Name of parent/carer | |
| Relationship to child | |
| Date | |