

Boroughbridge Primary School and Nursery

**Intimate Care Policy**

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| Date Adopted  Aug 2024 | Date for Review  Aug 2025 | Person/s Responsible  Headteacher |
| Approved by: | Emma Ryan  Headteacher | Jules Preston  Governor |

This Policy is valid from the date as recorded, thereby invalidating any other preceding policy.

Where a ‘named’ person is no longer in post, this policy remains valid until the next review date.

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# 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 who require intimate care are not discriminated against, in line with the Equality Act 2010
* Parents/carers 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 that involves toileting, washing, changing, touching or carrying out an invasive procedure to children’s intimate personal areas.

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# Legislation and statutory guidance

This policy complies with [statutory safeguarding guidance](https://www.gov.uk/government/publications/keeping-children-safe-in-education--2). It also complies with our funding agreement and articles of association.

# Role of parents/carers

Unless there is a medical need and an individual Health Care Plan with intimate care has been provided, all children who attend our school are expected to be toilet trained and not wearing nappies.

Seeking parental permission

All parents/carers are asked to provide consent to staff assisting their child when attending the toilet or changing if necessary.

For children whose needs are more complex or who need particular support outside of what's covered in the permission form, a Health Care Plan with Intimate Care will be created in discussion with parents/carers (see ‘Creating an intimate care plan’ below).

Where there is neither a Health Care Plan with intimate care nor parental consent for intimate 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/carers 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/carers afterwards.

Creating an intimate care plan

Where a Health Care Plan with intimate care is required, it will be agreed in discussion between the school, parents/carers, the child (when possible) and any relevant health professionals.

The school will work with parents/carers 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/carers 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.

Sharing information

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

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# Role of staff

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.

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 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.

# Intimate care procedures

How procedures will happen

School will ensure that anyone who undertakes intimate care is an employee of the school and has had appropriate safeguarding checks. Staff will follow the nappy changing procedure as outlined in the Nappy Changing Procedure.

There will always be 2 members of staff present when intimate care is provided.

We are aware that from time to time, a child may have a toiletry accident. In this case, we will change the child provided parents/carers have provided consent. Parents/carers will be notified at the end of the school day.

Where a child has an individual Health Care Plan with intimate care, only those staff named on the Health Care Plan will be involved in providing support with intimate care to a learner. School will ensure that sufficient staff are named on care plans and available to provide the required support in all foreseeable circumstances. If, in exceptional circumstances, none of the named staff members for an individual are available, school will contact the family for their consent to involve a different member of staff.

Only in an emergency would staff undertake intimate care that has not been agreed with the parents/carers. This act of care would be reported to a member of the Senior Leadership Team and to the parents/carers as soon as possible after the event. The reasons for this and the care undertaken would be documented by the staff member who had delivered the care.

A secure record will be kept of all children who receive intimate care.

For children with an individual Health Care Plan with intimate needs, a monthly Nappy Changing Record will be kept and provided to parents on request. This record will include the date and time of the care, who was present and any care given that has differed from the Health Care Plan, together with the reason for this.

Any changes in the learner’s behaviour or appearance will be documented and reported to the designated safeguarding lead, in line with the safeguarding policy.

Procedures will be carried out in our First Aid facilities or according to the individual Health Care Plan.

When carrying out procedures, the school will provide staff with: Protective PPE (disposable gloves, apron), cleaning supplies, changing station and bins.

Parents/carers to ensure that the child has a set of spare, clean underwear in school in the event of a toiletry accident. For pupils needing routine intimate care, the school expects parents/carers 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.

Concerns about safeguarding

If a member of staff carrying out intimate care has concerns about physical changes in a child’s appearance (eg. 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 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.

# Monitoring arrangements

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

# Links with other policies

This policy links to the following policies and procedures:

* Accessibility plan
* Child protection and safeguarding
* Health and safety
* SEND
* Supporting pupils with medical conditions
* Nappy changing procedure