



# Intimate Care Policy

Written: May 2024

To be reviewed: May 2027

## Appendices

- a) [Record of Intimate Care Intervention](#)
- b) [Toilet Management Plan](#)
- c) [Intimate Care Risk Assessment](#)

## Statement of intent

The Pioneer Academy takes the health and wellbeing of its pupils very seriously. As described in the Supporting Pupils with Medical Conditions Policy, the school aims to support pupils with physical disabilities and illnesses to enable them to have a full and rich academic life whilst at school.

The trust board recognises its duties and responsibilities in relation to the Equality Act 2010, which states that any pupil with an impairment affecting their ability to carry out normal day-to-day activities must not be discriminated against.

Pupils will always be treated with care, sensitivity and respect when intimate care is given, and no pupil will be left feeling embarrassed or as if they have created a problem.

## Legal framework

This policy has due regard to all relevant legislation and statutory guidance including, but not limited to, the following:

- Children and Families Act 2014
- Education Act 2011
- Health Act 2006
- Equality Act 2010
- DfE (2023) 'Keeping children safe in education'

This policy operates in conjunction with the following Trust and school policies:

- Health and Safety Policy
- Supporting Pupils with Medical Conditions Policy
- First Aid, Injuries, Allergies and Medication Policy
- Child Protection and Safeguarding Policy
- Staff Code of Conduct
- Whistleblowing Policy
- SEND Policy
- Equality Policy

## Definitions

For the purpose of this policy, **intimate care** is defined as any care which may involve the following:

- Washing
- Touching
- Carrying out an invasive procedure
- Changing a child who has soiled themselves
- Providing oral care
- Feeding
- Assisting in toilet issues
- Providing comfort to an upset or distressed pupil

Intimate care tasks are associated with bodily functions, body products and personal hygiene that demand direct or indirect contact with, or exposure of, the genitals.

Examples of intimate care include support with dressing and undressing (underwear), changing incontinence pads, nappies or medical bags such as colostomy bags, menstrual hygiene, helping someone use the toilet, supporting with catheterisation or washing intimate parts of the body.

Pupils may be unable to meet their own care needs for a variety of reasons and will require regular support.

## **Health and safety**

The Health and Safety Policy lays out specific requirements for cleaning and hygiene, including how to deal with spillages, vomit and other bodily fluids.

Any member of staff that is required to assist a pupil with any intimate medical procedure, such as a medical bag or catheterisation, will be fully trained to do so and will carry out the procedure in accordance with the Supporting Pupils with Medical Conditions Policy.

Staff will wear disposable aprons and gloves while assisting a pupil with their intimate care needs.

Soiled nappies, incontinence pads and medical bags will be securely wrapped and disposed of appropriately.

Where a pupil requires intimate care or toileting support, nappies, incontinence pads and medical bags will be disposed of in the clinical/medical waste bins, as per health and safety guidelines.

The changing area or toilet will be left clean. Hot water and soap will be available to wash hands. Paper towels will be available to dry hands.

## **Staff and facilities**

Staff members who provide intimate care will be suitably trained, and will be made aware of what is considered good practice.

Staff will only be required to administer intimate care if it is listed in their job description or contract of employment.

Suitable equipment and facilities will be provided to assist pupils who need special arrangements following assessment from a physiotherapist or occupational therapist. This may include the following:

- [Adjustable bed](#)
- [Changing mat](#)
- [Non-slip step](#)
- [Cupboard](#)
- [Adapted toilet seat or commode seat](#)
- [Hoist](#)
- [Swivel mat](#)
- [Disposable gloves/aprons](#)
- [Nappies, pads and medical bags](#)
- [Tissue rolls \(for changing mat/cleansing\)](#)
- [Supply of hot water](#)
- [Soap](#)
- [Barrier creams](#)
- [Antiseptic cleanser for staff](#)
- [Antiseptic cleanser for the changing bed/mat](#)
- [Clinical waste bag](#)
- [Spillage kit](#)

Mobile pupils will be changed while standing up. Pupils who are not mobile will be changed on a purpose-built changing bed or changing mat on the floor.

Staff will be supported to adapt their practice in relation to the needs of individual pupils, taking into account developmental changes such as the onset of puberty or menstruation.

## **School responsibilities**

Arrangements will be made with any relevant multi-agency to discuss the personal care needs of any pupil prior to them attending the school, or as soon as the need is identified.

Where possible, pupils who require intimate care will be involved in planning for their own healthcare needs, along with input from parents welcomed.

In liaison with the pupil and parents, an individual intimate care plan will be created to ensure that reasonable adjustments are made for any pupil with a health condition or disability.

Regular consultations will be arranged with all parents and pupils regarding toilet facilities.

The privacy and dignity of any pupil who requires intimate care will be respected at all times. A designated member of staff will change the pupil, or assist them in changing themselves if they become wet, or soil themselves. Any pupil with wet or soiled clothing will be assisted in cleaning

themselves and will be given spare clothing, nappies, pads, etc., as provided by the parents. Parents will be called if there are insufficient items in school as required to change the child.

Members of staff will react to accidents in a calm and sympathetic manner. Accurate records of times, staff, and any other details of incidents of intimate care will be kept in a Record of Intimate Care Intervention, and they will be stored in SEND class folders in the classroom.

Arrangements will be made for how often the pupil should be routinely changed if the pupil is in school for a full day, and the pupil will be changed by a designated member of staff.

The family's cultural practices will always be taken into account for cases of intimate care. Where possible, only same-sex intimate care will be carried out.

Parents will be contacted if the pupil refuses to be changed, or becomes distressed during the process. Excellent standards of hygiene will be maintained at all times when carrying out intimate care.

### **Parental responsibilities**

Parents will change their child, or assist them in going to the toilet, at the latest possible time before coming to school.

Parents will provide spare nappies, incontinence pads, medical bags, wet wipes and a change of clothing in case of accidents.

A copy of this policy will be read and signed by parents to ensure that they understand the policies and procedures surrounding intimate care.

Parents will inform the school should their child have any marks or rashes. If any marks or rashes are noticed during changing, parents will be informed at the end of the day, unless it is deemed the mark or rash may require urgent medical attention and/or is causing the child distress.

### **Safeguarding**

Two members of staff will be required when intimate care procedures are taking place unless the parent is also present.

Staff members working directly with children will receive safeguarding training as part of their mandatory induction, in line with the Child Protection and Safeguarding Policy.

Intimate care is a regulated activity; therefore, only members of staff who have an enhanced DBS certificate with a barred list check are permitted to undertake intimate care duties.

Wherever possible, staff involved in intimate care will not be involved in the delivery of sex education to the pupils in their care as an extra safeguard to both staff and pupils involved.

Individual intimate care plans will be drawn up for pupils as appropriate to suit the circumstances of the pupil.

Each pupil's right to privacy will be respected. Careful consideration will be given to each pupil's situation to determine how many carers will need to be present when the pupil requires intimate care.

If any member of staff has concerns about physical changes to a pupil's presentation, such as marks or bruises, they will report the concerns to the Designated Safeguarding Leader immediately and follow the schools' Safeguarding and Child Protection Policy and procedures.

Special consideration will be taken to ensure that bullying and teasing does not occur.

## **Swimming**

Pupils who regularly participate in swimming lessons at Erith Leisure Centre as part of the school's curriculum offer are entitled to privacy when changing; however, some pupils will need to be supervised during changing.

Parental consent will be obtained before assisting any pupils in changing clothing before and after swimming lessons unless it is considered an emergency by the lead member of staff. Should this happen, parents will be notified as soon as is possible.

Details of any additional arrangements will be recorded in the pupil's individual intimate care plan.

## **Offsite visits**

Before offsite visits, including residential trips, the pupil's individual intimate plan will be amended to include procedures for intimate care whilst off the school premises.

Staff will apply all the procedures described in this policy during residential and off-site visits.

Consent from a parent will be obtained and recorded prior to any offsite visit.

## **Toileting/Nappy Changing**

Where potties are used, they will be emptied immediately and cleaned with an anti-bacterial spray. The potty or toilet is checked to assess whether it is clean before use and toilet paper is well stocked.

Gloves and aprons will be worn before each change and the area should be prepared to ensure it is clean and suitable for use. Gloves must be worn at all times when changing nappies, and during any instances where the member of staff could come into contact with bodily fluids.

All pupils will be accompanied to the toilet and will be appropriately supervised and supported during the toilet training stage. Staff will be sensitive and sympathetic when changing pupils and will not make negative facial expressions or negative comments. Pupils' efforts will be reinforced by praise where appropriate.

Staff are required to ensure that soiled/wet nappies are changed as soon as possible. Where pupils are knowingly left in soiled nappies and/or clothes, this will be dealt with in line with the school's Disciplinary Policy and Procedure.

Pupils will be encouraged to wash their hands with soap and warm water, with assistance provided where necessary.

If a pupil has a toileting accident, they will be offered assistance to change or be changed by a member of staff regardless of their age.

To build independence, pupils will be encouraged to replace their own clothes and flush the toilet, if they are capable of doing so.

Parents are consulted on the approach to toilet training their pupil to ensure there is consistency with the approach at home. Pupils' progress is discussed at handover with parents. If any pupil is struggling with toilet training techniques or has any issues, e.g. a rash, this will be discussed with the Headteacher and the pupil's parents.

### **Monitoring and review**

All changes are communicated to relevant stakeholders.



## Toilet Management Plan

Pupil's name:	Class/year group:
Name of personal assistant:	
Date:	Review date:
<b>Area of need</b>	
<b>Equipment required</b>	
<b>Locations of suitable toilet facilities</b>	
<b>Support required</b>	<b>Frequency of support</b>

### Working towards independence

Pupil will try to	Personal assistant will	Parents will	Target achieved date

Signed \_\_\_\_\_ Parent

Signed \_\_\_\_\_ Personal assistant

Signed \_\_\_\_\_ Second member of staff

Signed \_\_\_\_\_ Pupil (where appropriate)



## Personal Intimate Care Risk Assessment

Name:				
Class:				Date:
Completed By:				
Hazards Considered:	Who might be harmed and how:	Level of risk: Low/Medium/High	Existing Control Measures:	Further action if required:
<b>Personal and intimate care is not delivered safely by trained staff</b>	Harm to the individual child or young person receiving the personal or intimate care in the educational setting	Medium	<p>An Intimate Care Policy in Educational Settings has been implemented (<i>model Policy is available on the Schools Portal</i>).</p> <p>The policy is communicated to all employees within the school and a record of this is maintained. Parental consent has been obtained and a written record is maintained.</p> <p>Employees who undertake personal and intimate care related to medical procedures (such as catheterisation) have received the appropriate training.</p> <p>Each child / young person in receipt of personal and intimate care as part of their medical needs has an Individual Health Care Plan which is reviewed annually or updated when provision changes.</p>	

<p><b>Safeguarding of children and young people, and staff in school delivering personal and intimate care</b></p>	<p>Disabled children and young people are particularly vulnerable to abuse and discrimination.</p> <p>Due to the nature of personal and intimate care staff can be more vulnerable to accusations of abuse than in other educational settings</p>		<p>All staff working with children and young people must have been through the schools' safer recruitment process.</p> <p>All school staff are familiar with the school's Safeguarding and Child Protection policy and procedures and the school's Intimate Care policy.</p> <p>Through initial inductions and through regular updates all staff should understand to whom and how they may report issues or concerns.</p> <p>School leaders using risk assessments should identify situations where it is appropriate for two members of staff to be present.</p> <p>The number of carers including the reasons must be clearly documented in the child's or young person's intimate care plan.</p> <p>Wherever practical with personal and intimate care with one colleague being able to at least hear and have oversight, whilst the other member of staff delivers the care.</p> <p>Male adults should not normally be involved in providing intimate care for girls.</p> <p>School leaders should always consider religious and cultural values when planning the delivery of personal and intimate care.</p>	
<p><b>The dignity of the child or young person in receipt of personal and intimate care</b></p>	<p>Inappropriate or issues related to communication and poor training of staff</p>		<p>Staff need to get to know the child or young person before working with them.</p>	

	is likely to impact of the dignity of the children and young people receiving personal and intimate care		<p>Staff need to be aware of any personal, cultural, or religious sensitivities related to aspects of intimate care</p> <p>Where possible. staff should always seek the child's / young person's permission to carry out a task, respect their preference for the sequence of care and encourage them to do as much as possible for themselves.</p> <p>Staff should address the child or young person in an ageappropriate manner and agree the terminology for parts of the body and bodily functions that will be used by all</p> <p>All staff engaged in personal and intimate care related to medical procedures should receive appropriate training and this should be reviewed and updated regularly as part of the schools' overall plan for all staff Continuous Professional Development.</p> <p>Training should form part of, but not exclusively to, the discussion in relation to staff appraisal and or supervision arrangements</p>	
<b>Personal and intimate care is undertaken in an inappropriate environment</b>	A poor environment might put the safety of children and young people receiving personal and intimate care and the staff delivering the care at risk		<p>Facilities are provided that allow dignity and privacy including a fully accessible changing area.</p> <p>Hot and cold running water is available.</p> <p>Personal Protective Equipment (PPE) such as aprons and gloves, where required are available to staff.</p> <p>Nappy / incontinence pad disposal bags are available and used with supplies of nappies (provided by family)</p>	

			<p>Anti-bacteria sprays / wipes and cleaning cloths are provided to staff undertaking personal and intimate care.</p> <p>Labelled bins for the disposal of wet and soiled nappies /. incontinence pads (Soiled items should be double-bagged.)</p> <p>Special arrangements for the disposal of any contaminated or clinical materials including sharps and catheters</p> <p>Supplies of suitable cleaning materials, anti-bacterial sprays /wipes and handwash for example are available to staff</p> <p>Appropriate clean clothing (preferably the child's own) is provided</p> <p>Effective staff alert system for help in an emergency is understood by all school staff</p> <p>Arrangements for menstruation when working with adolescent girls are in place including the disposal of waste.</p>	
<b>Record Keeping</b>	Poorly maintained records may result in unsafe care being provided.		<p>Records are reviewed routinely to ensure accuracy. These include the training records of staff.</p> <p>Individual Health Care Plans are updated at least annually, or when changes take place. Changes are effectively communicated to all relevant parties.</p>	

