

SHERINGTON PRIMARY SCHOOL INTIMATE CARE POLICY



Our Vision Statement

Sherington Primary School is an inclusive community. We place the child at the centre of all that we do. We strive to maintain the highest standards in an environment that is creative, stimulating, inspiring and enabling.

- Aspire** Motivating and exciting all to become lifelong learners
- Believe** Developing the skills and confidence to foster self-belief
- Create** Engaging all learners through creative practice and personal reflection
- Achieve** Experiencing success and embracing future challenges

Our Aims are:

- To place the child at the centre of all that we do.
- To foster positive, supportive relationships with families and the wider community.
- To provide models of excellence drawing on the expertise of our highly skilled team.
- To provide an enquiry based curriculum, that promotes the values of resilience, adaptability and perseverance.
- To promote lifelong learning through developing a whole school culture of challenge and growth.
- To prepare learners for a future in an increasingly interconnected global economy.

Policy Date:	
Ratified by Governors:	
Date due for review:	

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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
- The dignity, rights and wellbeing of children are safeguarded
- Children 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.

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. These are included in EYFS and in year starter packs and used as appropriate.

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 twice a year, even if no changes are necessary, and updated regularly, as well as whenever there are changes to a child'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. Where daily care is received a book of communication between parents and school will monitor care and health.

4. Role of staff

4.1 Which staff will be responsible

Any roles who may carry out intimate care will have this set out in their job description. This includes Class Teachers and Teaching Assistants who work closely with the child and, where appropriate, have the appropriate training. In the event of emergency intimate care, for example, at lunchtime or on a school trip, a DBS checked member of staff who is not known to the child can provide the care, supported by another adult. This may include Midday Meal supervisors, SENCo, First Aid staff and SLT.

No volunteers, ITE students, adults undertaking work experience or children can be required to provide intimate care.

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

Intimate care will be completed by adults known to the child and in a familiar area. Adults will notify additional class staff and ensure parents are notified at the end of the day. For toileting accidents and changing wet clothes, pupils and staff use the communal toileting areas and children are encouraged to change themselves as much as possible. For intimate first aid checks or treatment two adults are present in the first aid area.

For children who receive intimate medical care (invasive procedures), two adults will be present at all times and a record of care will be recorded and communicated daily with parents. If there is a known risk of false allegations by a pupil, two adults will also be present.

All members of staff, both female and male are responsible for intimate care, as DBS checked and trusted members of staff. Members of staff to maintain safeguarding procedures ensuring another member of staff is made aware and are present when supporting changing. Procedures will be carried out in communal toileting areas, hygiene suite and first aid room.

Should there be a new rise in COVID cases, 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 equipment as appropriate to age. This would include a changing mat, hygiene suite changing bed, paper surface covering, nappy sacks for disposal, hand gels and soaps, hygiene bins and cleaning products.

For children 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, catheters, nappy bags and wipes.

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 one of our Safeguarding leads or SENCo as appropriate.

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. Positive touch

Touch is important and may be used routinely for any of the following reasons (this gives examples and is not an exhaustive list):

- For communication This is particularly likely to occur during intensive interaction. Any intensive interaction will be supported by an individual plan for the child.
- For use in specific curriculum subjects This is likely to occur when support or guidance is needed for example during P.E or swimming.
- For play This is likely to be encouraged so that children have similar experiences as their mainstream peers e.g. playing tag games.
- As part of a sensory circuit where the child opts for a touch based calming activity.
- For emotional reasons to communicate affection and warmth, to give reassurance and to communicate security and comfort or support a child who is distressed
- For the purposes of care Touch necessary to carry out personal care e.g. toileting
- To give medical and nursing care This is particularly likely when staff need to offer support after a seizure or injury following a medical programme or advice.
- To give physical support Such as transferring into and out of a wheelchair and in order to guide children between places, rooms or activities or for moving and handling
- To protect All children from dangerous situations by physically intervening e.g. to break up a fight or to manage challenging behaviours. All touch that results in a positive handling procedure will be recorded in the Bound Book using the Physical intervention Policy and procedures which includes appropriate debrief with pupils when this is possible.

7. Monitoring arrangements

This policy will be reviewed by the school SENCo twice a year. At the mid-point review, the Headteacher will sign off the review with the SENCo. At the full review, the policy will be approved by the Governing Body.

Agreement for intimate care will be included in our admissions pack from September 2025 for all new starters: agreement will be relevant to the needs of the child.

8. 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



Sherington Intimate care plan parent permission

PARENTS/CARERS	
Name of child	
Type of intimate care needed	
How often will care be given?	
What training will staff be given?	
Where will care 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?	
What do members of staff need to know when helping me	
Signature of child	
Date	

This plan will be reviewed twice a year.

Next review date: May 2023

To be reviewed by: Joanna Richards (Inclusion Manager)



Sherington 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). 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	

PERMISSION FOR SCHOOL TO PROVIDE INTIMATE CARE

Date