BJS Federation of Schools

Intimate Care Policy

Policy Owner: Governing Board

Federation Lead: Executive Headteacher
Policy Adopted: Autumn 2024
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Review Frequency: At the point of any change

Signed _____

Ms A. Parker, Executive Headteacher

Signed _____

Ms T. Wakefield, Chair of Teaching & Learning Wellbeing Committee

The BJS Federation of Schools understands the importance of its responsibility to safeguard and promote the welfare of children. Pupils may require assistance with intimate care as a result of their age, medical needs or due to having SEND. In all instances, effective safeguarding procedures are of paramount importance.

This policy has been developed to ensure that all staff responsible for providing intimate care undertake their duties in a professional manner at all times and treat children with sensitivity and respect. The school is committed to providing intimate care for children in ways that :

- Maintain their dignity.
- Are sensitive to their needs and preferences.
- Maximise their safety and comfort.
- Protect them against intrusion and abuse.
- Respect the child's right to give or withdraw their consent.
- Encourage the child to care for themselves as much as they can.
- Protect the rights of all others involved. Children must be toilet trained on entry to school.

Our Early Years team are on hand to offer advice on how to toilet train and they will direct parents to the relevant support (as required). We recognise that all children have different needs and that some children may need additional support due to a medication condition, disability or Special Educational Need. In these cases, parents should contact the Early Years team at the earliest opportunity prior to the child starting in school.

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1. Aims

1.1 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

1.2 Intimate care refers to any care that involves toileting, washing, changing, touching or carrying out an invasive procedure to children's intimate personal areas.

2. Legislation and statutory guidance

2.1 This policy complies with statutory safeguarding guidance.

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

3. Role of parents/carers

3.1 Seeking parental permission

For children who need to be supported with routine or occasional intimate care (e.g. for toileting or toileting accidents), parents/carers 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/carers (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/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.

Parents are responsible for:

- Liaising with the school to communicate their wishes in regard to their child's intimate care.
- Providing their consent to the school's provision of their child's intimate care.
- Adhering to their duties and contributions to their child's intimate care plan, as outlined in this policy.

3.2 Creating an intimate care plan

Where an intimate care plan 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.

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

4. Role of staff

The Executive Headteacher is responsible for:

- Ensuring that intimate care is conducted professionally and sensitively.
- Ensuring that the intimate care of children is carefully planned, including the creation of individual plans following discussions with the parent and the child and with input from the SENCO.
- Communicating with parents in order to establish effective partnerships when providing intimate care to children.
- Handling any complaints about the provision of intimate care in line with the school's Complaints Procedures Policy.

All members of staff who provide intimate care are responsible for:

- Undergoing appropriate training for the provision of intimate care.
- Undertaking intimate care practice respectfully, sensitively and in line with the guidelines outlined in this policy.

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 SLT, Teachers, EYEs, HLTAs and Teaching Assistants.

No other staff members 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 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

Staff who provide intimate care will have a list of personalised changing routines for the children in their care, which will be adhered to and will be shared with parents regularly.

Staff who provide intimate care will conduct intimate care procedures in addition to any designated changing times if it is necessary; no child will be left in wet/soiled clothing.

If the designated member of staff for a child's intimate care is absent, a secondary designated member of staff will change the child, adhering to the arranged routines

Stock is kept ensuring there will be clean underwear, wipes and any other individual changing equipment necessary.

Before changing a child, members of staff will put on disposable gloves and aprons, and the changing area will be cleaned appropriately.

The changing areas are warm and comfortable for the children and are positioned so that the child's privacy is protected at all times.

Hot water and soap are available for staff to wash their hands before and after supporting a child and the changing area will also be cleaned appropriately after use.

Any soiled clothing will be placed in a tied plastic bag and will be returned to parents at the end of the school day.

Any bodily fluids that transfer onto the changing area will be cleaned appropriately.

If a pupil requires cream or other medicine, such as for a rash in an intimate area, this will be provided by parents and in accordance with the Administering Medication Policy, and full parental consent will be gained prior to this.

Members of staff will use the Toilet Introduction Procedures, as outlined in the appendices of this policy, to get children used to using the toilet and encourage them to be as independent as possible.
All children will be encouraged to use the toilet facilities and will be reminded at regular intervals to go to the toilet.

Children will be reminded and encouraged to wash their hands after using the toilet, following the correct procedures for using soap and drying their hands.
When carrying out procedures, the school will provide staff with protective gloves, cleaning supplies, changing mats and bins.

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, wipes, underwear and/or a spare set of clothing.

Any soiled clothing will be contained securely, clearly labelled, and discreetly returned to parents/carers 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 SLT.

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

6.1 This policy will be reviewed annually by the head teacher EYFS Lead and DSL, who will make any changes necessary and communicate these to all members of staff. At every review, the policy will be approved by the governing committee and the head teacher.

6.2 All members of staff are required to familiarise themselves with this policy as part of their induction programme

7. Links with other policies

This policy has due regard to the relevant legislation, including, but not limited to, the following

- Accessibility plan
- Child protection and safeguarding
- Health and safety
- SEND
- Supporting pupils with medical conditions
- Equality Act 2010
- Safeguarding Vulnerable Groups Act 2006
- Childcare Act 2006

The BJS Federation uses this policy and guidance from Lambeth LA to ensure best practice in managing children's personal and self-care in Lambeth (EYFS) settings and schools from birth to five.

Appendix 1: 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: 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)	☐
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)	☐
I understand the procedures that will be carried out and will contact the school immediately if I have any concerns	☐
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). 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.	☐
Parent/carer signature	
Name of parent/carer	
Relationship to child	
Date	

Appendix 3: Toilet Introduction Procedures

As children develop bladder control, they will pass through the following three stages:

1. The child becomes aware of having wet and/or soiled pants
2. The child knows that urination/defecation is taking place and can alert an adult
3. The child realises that they need to urinate/defecate and alerts an adult in advance

During these stages, parents should assess the child over a period of two weeks to determine:

- If there is a pattern to when the child is soiled/wet.
- The indicators that the child displays when they need the toilet, e.g. facial expressions.

Parents should implement the following strategies to get children used to using the toilet and being independent:

- Familiarise the child with the toilet, washing their hands, flushing the toilet and referencing other family members/siblings as good role-models for this practice
- Encourage the child to use the toilet when they are using their personal indicators to show that they may need the toilet
- Take the child to the toilet at a time when monitoring has indicated that this is when they would usually need the toilet
- Ensure that the child can reach the toilet and is comfortable doing so
- Stay with the child and talk to them to make them more relaxed about using the toilet
- Don't force the child to use the toilet if they don't want to, but still encourage them to do so using positive language and praise
- Deal with any accidents discreetly, sensitively and without any unnecessary attention
- Be patient with children when they are using the toilet, and use positive language and praise to encourage them