Lingfield Primary School

A Personal Best School



Intimate Care Policy

Date Agreed by Governors	Summer 2025
Review Date	Summer 2027

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 needs linked to a special educational need 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, use of Medical Tracker) that protect themselves and the pupils involved
- Intimate care refers to any care which involves toileting, washing, changing, touching or carrying out a procedure to children's intimate personal areas.

Legislation and statutory guidance

This policy complies with <u>statutory safeguarding guidance</u>.

Role of parents

Government guidance (Clean and Dry in Time for School: a multi-agency approach to toilet training for children aged3 to 19 years, 2012) states:

Child and Family

Continence issues that persist for school-age children are likely to impact on the child's emotional health. Featherstone (2004) states: "A lack of emotional wellbeing can cause worry and stress, leading to aggression, fatigue or withdrawal, all of which has the potential to impair learning capacity."

Proactive management is more likely to enable the child to focus on settling in to school and learning. In addition, the child may find it easier to be accepted by their peers, make friends and have a more positive school experience.

Parents will benefit from consistent advice and be empowered to manage their own child's health needs. In addition, there will be less pressure on limited family budgets when parents no longer have to buy nappies.

School

Continence issues in the classroom impose a considerable pressure on the limited resources available. Time that should be spent supporting the child's learning is often used to clean and settle the child after an 'accident', resulting in less time available for all those children in the class. Effective management will enable school staff to focus on the child's learning and not on continence management.

Seeking parental permission

For children who need routine intimate care as part of an intimate care plan, parents will be required to consent to regular intimate care.

It is not expected for children beyond Nursery to require regular changing outside of an intimate care plan. For children with the Nursery setting, it is age appropriate for accidents to occur but children should no longer be in nappies.

For children whose needs are more complex or who need particular support beyond age-appropriate accidents, an intimate care plan will be created in discussion with parents and health care professionals (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 an 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 at the earliest opportunity. The school has a duty of care in this regard. If a child says, "No" or openly resists changing, the school will stop the intimate care. The school does not have legitimate grounds to restrain a child for the purpose of intimate care.

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 appropriate) and relevant health care 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 is doubt whether the child is able to make an informed choice, their parents/carers will be consulted.

The plan will be reviewed when required, even if no changes are necessary, and updated as necessary.

Sharing information

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

If any safeguarding concerns are raised during intimate care, please consult the school's safeguarding policy.

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 annual safeguarding training and have read this policy.

Intimate care procedures

How procedures will happen

It is best practice from a health and safety and safeguarding perspective to have 2 members of staff present. If this is not possible, the member of staff carrying out the procedure will log the incident on Medical Tracker as soon as possible.

Procedures will be carried out in a location that enables minimal disruption to learning but that allows appropriate supervision to take place.

When carrying out procedures, the school will provide staff with:

• Protective gloves, cleaning supplies, changing mats and bins as required.

Where possible, pupils will be changed and/or cleaned in a standing position.

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, wipes and a spare set of clothing.

If a child has a nappy rash or any other medical condition linked to intimate care, the school's medical policy is applied. Parents/carers need to supply appropriate nappy cream and give consent to the school's medical officer that this can be administered.

Any soiled clothing will be contained securely and discreetly returned to parents at the end of the school day.

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 to the DSL.

If a child is hurt or there is an issue when carrying out the procedure, the staff member will report the incident immediately to DSL.

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 by the DSL and Headteacher every two years or as required; the policy will be approved by the governors.

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

Appendix 1: 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)			
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		