Intimate Care and Toileting Policy



Approved by: Priory Rise School Local Governing **Date:** June 2023

Board

Next review due by: June 2025

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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
- 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

Definition: 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

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

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 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.

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 and will expect parents/carers to also share relevant information regarding any intimate matters as needed.

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 teachers, teaching assistants and learning mentors.

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 - our approach to best practice:

- The management of all children with intimate care needs will be carefully planned.
- The child who requires intimate care is treated with respect at all times; the child's welfare and dignity is of paramount importance.
- Staff who provide intimate care are trained to do so (including Child Protection and Safeguarding training) and are fully aware of best practice. The child will be supported to achieve the highest level of autonomy that is possible given their age and abilities.

- Staff will encourage each child to do as much for him/herself as he/she can. This may mean, for example, giving the child responsibility for washing themselves. Individual intimate care plans will be drawn up for particular children, as appropriate, to suit the circumstances of the child.
- Each child's right to privacy will be respected.
- Careful consideration will be given to each child's situation to determine how many adult carers might need to be present when a child is toileted.
- It is best practice from a health and safety and safeguarding perspective to have 2 members of staff present when carrying out intimate care, unless there is a sound reason for having more adults present (for example, if there is a known risk of false allegations by a pupil, or if it is an invasive procedure). If this is the case, the reasons should be clearly documented.
- Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the child's care plan.
- The needs and wishes of children and parents will be taken into account wherever possible within the constraints of staffing and equal opportunities legislation.
- The school's Child Protection & Safeguarding Policy and Multi-Agency Child Protection procedures will be adhered to.
- All children will be taught personal safety skills carefully matched to their level of ability, development and understanding. For example, they are taught to say 'no' if someone does something they do not like.
- If a member of staff has any concerns about physical changes in a child's presentation, e.g., marks, bruises, soreness etc. s/he will immediately report concerns to the HT or a Designated Safeguarding Lead (or other Designated Safeguarding Lead at the school).
- If a child becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be looked into, and outcomes recorded.
- Parents/carers will be contacted at the earliest opportunity as part of this process in order to reach a resolution.
- Staffing schedules will be altered until the issue(s) are resolved so that the child's needs remain paramount.
- Further advice will be taken from outside agencies if necessary.
- If a child makes an allegation against a member of staff, all necessary procedures will be followed.
- All staff will be required to confirm that they have read the most recent version of document 'Keeping Children Safe in Education' and understand the need to refer to other policies the school may hold for clarification of practices and procedures.

Procedures will be carried out in the dedicated changing toilets around school.

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

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.

Any soiled clothing will be contained securely, clearly labelled, and discreetly returned to parents/carers at the end of the school day.

5.2 Intimate Care Equipment

The school will provide appropriate equipment for staff to carry out intimate care or toileting needs, including protective gloves, cleaning supplies, changing mats and bins.

5.3 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 the DSLs in school, who will follow up according to safeguarding procedures.

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

This policy will be reviewed by the headteacher every two years. At every review, the policy will be approved by the Chair of the Local Governing Board.

7. Links with other policies

This policy links to the following policies and procedures:

- Accessibility plan
- Child protection and safeguarding policy
- Health and safety policy
- SEND policy
- Supporting pupils with medical conditions

Appendix 1: Priory Rise School Intimate Care Plan Template

Name of child:				
Name of person(s) to provide care:				
Name of person(s) to provide care for the child if main adult unavailable*:				
Details of intimate care to be given:				
Where care will take place:				
Resources and equipment provided by home:				
Resources and equipment provided by school:				
Who will provide the resources and equipment that will be used:				
Training requirements for staff:				
Disposal of any products in:				
Infection control measures:				
Special arrangements for trips/ outings:				
When will the plan be reviewed:				
Review comments:				
If the child is unduly distressed, a member of	staff will contact the parent/carer.			
*If the above-named member of staff is not available due to illness or staff training, then another person, familiar to the child will attend to the child's needs.				
Parental Permission:				
SENCO/ Inclusion Leader approval:				
Date:				

Appendix 2: 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 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			