

Exeter a learning community



Intimate Care Policy 2023-25

Reviewed and agreed: September 2023

Review date: September 2025

Intimate Care Policy

Exeter A Learning Community is committed to safeguarding and promoting the wellbeing of all our children.

Introduction

Intimate care is any care which is associated with invasive procedures relating to bodily functions, bodily products and personal hygiene which demands direct or indirect contact with or exposure of intimate parts of the body, such as cleaning up after a child who has soiled themselves. In addition, some children may need help with dressing/undressing or using the toilet. Most children can carry out these functions themselves but it is recognised that some are unable to due to physical disability, learning difficulties, medical needs or needs arising from the child's stage of development.

This Intimate Care Policy has been developed to safeguard children, support staff and ensure good practice is followed. At Exeter a Learning Community all staff are checked with the Disclosure and Barring Service (DBS) and we are committed to ensuring that all staff responsible for the intimate care of children will undertake their duties in a professional and caring manner at all times. We believe that the intimate care of children cannot be separated from other aspects of their learning and development and we believe that every child has the right to feel safe and secure. We do not discriminate against children who have not reached a stage where they can manage their own personal hygiene and as such welcome all children to participate in our school and provide appropriate support for each child on an individual basis. We recognise the need to treat all children with respect and dignity when intimate care is given. No child should be attended to in a way that causes distress, embarrassment or pain.

We aim to:

- Safeguard the rights and promote the welfare of all children and young people including those who may be more vulnerable to abuse.
- Provide guidance and reassurance to staff whose duties may include intimate care.
- Assure parents and carers that staff are knowledgeable about personal care and that their child's individual needs and concerns are taken into consideration.
- Remove barriers to learning and participation, protect from discrimination and ensure inclusion for all children and young people within our setting.

Our approach to Best Practice

Individual intimate care plans (see Appendix 2) will be drawn up for particular children as appropriate to suit the circumstances of the child. This will most typically be for children of school age who still require intimate care.

We will work with parents of a child who requires intimate care to establish a preferred procedure for supporting the child.

Where these procedures may require specialist training, we will seek out training for the staff who will be involved in a child's care, ensuring that the child's key-person and at least one other member of staff accesses the training.

Only permanent staff members i.e. those who have undergone safer recruitment carried out by the Trust HR team are permitted to change nappies or provide other forms of intimate care. Students, supply staff and volunteers are not permitted to change nappies or provide other forms of intimate care.

Staff members who are known to the child will take on that responsibility for changing children. The staff member who is involved will always ask the child for permission to assist them. The child will be supported to achieve the highest level of autonomy and independence that is possible given their age and ability. Careful consideration will be given to each child's situation to determine how many carers might need to be present when a child is toileted, however, as a guide:

- Two members of staff present when changing school age children (this will be specified in the child's intimate care plan)
- One member of staff when changing children in Nursery

Working with Parents

We believe that our partnership with parents is an essential principle in our setting and is particularly necessary in relation to children needing intimate care. We recognise that the information required to carry out intimate care is gained from parents as is prior permission (see Appendix 1 – consent from and Appendix 2 – intimate care plan). We acknowledge that cultural influences may affect what is deemed 'intimate' and ensure we pay regard to social, ethnic and cultural perspectives through open dialogue with parents.

Parents should be encouraged and empowered to work with staff to ensure that their child's needs are identified, understood and met.

It is the parent's responsibility to provide nappies, disposal bags and wipes.

Recording Keeping and Consent

Where large numbers of children are not yet toilet trained due to their age and stage of development i.e. in Nursery intimate care plans will not generally be required. Instead, parental consent should be sought for changing (see Appendix 1).

Where a child is not yet toilet trained or is requiring intimate care e.g. SEND needs, toilet training, or an injury preventing independent toileting or changing, an Intimate Care Plan should be formed in conjunction with the parent (see Appendix 2).

When any form of intimate care is carried out, it will be recorded on their own personal record (see Appendix 3). All information concerning intimate care procedures is recorded and stored securely in the child's pupil file.

We appreciate that sometimes children have toileting 'accidents' which are out of character for them. In the event of this, and in the absence of a personal intimate care plan, the child would be fully encouraged and supported to achieve the highest level of autonomy that is possible given their age and ability. Staff will encourage the child to do as much for his/herself as possible and parents will be informed the same day. On the rare occasion that a child is soiled to a point where they are unable to clean themselves to a comfortable state, parents would be contacted immediately so that the child could be taken home for bathing.

There may also be times when children unexpectedly need help with toileting – any support of this nature must be reported to the person's line manager, where possible, prior to the support, and recorded on an intimate care form.

The Protection of Children

Child Protection procedures will be adhered to. All children will be taught personal safety skills carefully matched to their level of development and understanding to build their confidence and assertiveness about their own body and its worth. Confident and assertive children who feel their body belongs to them are less vulnerable to abuse.

If a member of staff has a concern about physical changes in a child's presentation, e.g. marks, bruises, soreness etc. s/he will follow our safeguarding procedures. See Exeter's Safeguarding and Child Protection Procedures.

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.

If a child makes an allegation against a member of staff, all necessary procedures will be followed. (See Safeguarding and Child Protection Policy and the Whistleblowing Policy).

Only permanent staff members i.e. those who have undergone safer recruitment carried out by the Trust HR team are permitted to change nappies or provide other forms of intimate care. Students, supply staff and volunteers are not permitted to change nappies or provide other forms of intimate care.

Any form of recording or photograph equipment should never be taken into the changing area.

Allegations of Abuse

Personnel working in intimate situations with children can feel particularly vulnerable. This school policy can help to reassure both staff involved and the parents of vulnerable children. Action will be taken immediately should there be a discrepancy of reports between a child and the personal assistant. Where there is an allegation of abuse, the **whistleblowing procedures** will be followed.

Health and Safety

Guidelines for Changing Children

- If possible, children should be changed standing up or to use the low table to avoid lifting children.
- Where the changing table is at height, the adult must keep a hand on the child at all times and they must never be left unattended.
- The child's skin should be cleaned with a disposable wipe or other appropriate cleaning materials such as water/cotton wool depending on parental preference and child's allergies.
- Nappy creams/lotions should be labelled with the child's name and only used for that child.
- Disposable gloves should be worn when changing nappies. The nappy should be folded inward to cover faecal material and double wrapped in a nappy bag. Soiled nappies should be disposed of into the bin provided. The disposal bin should be lined and emptied at least weekly.
- Any soiled or damp clothing should be placed in a plastic carrier bag to be taken home.
- Once the child has been changed and removed from the changing area, the surface should be cleaned with an antibacterial detergent spray or wipe and left to dry.
- Gloves, apron and any items used for cleaning the changing area will be wrapped and disposed of via domestic waste.
- Hands should be thoroughly washed afterwards.
- Complete the intimate care record by all staff members present.

- No filming or recording equipment of any kind should be taken into the changing area.

Changing Procedures

A child's nappy should be checked on arrival at the nursery. If necessary it should be changed immediately. If it does not need to be changed the time checked should still be noted on the nappy changing chart.

All children should be changed as and when needed, but at least once per session unless soiled e.g. once in the morning and once in the afternoon if attending all day.

Policies

These guidelines should be read in conjunction with policies:

- Health and Safety Policy
- Child Protection and Safeguarding Policy
- Medical Policy
- Whistleblowing Policy
- Complaints Policy

The governing body reviews this policy every two years. The governors may, however, review the policy earlier than this, if the government introduces new regulations, or if the governing body receives recommendations on how the policy might be improved.

Appendix 1

(Letter to parent(s) outlining policy/procedures and their consent to carry out 'intimate care')

Dear Parents,

I am writing to you regarding occasions when your child may need support with intimate care routines. We have drawn up the attached guidelines to ensure that your child's needs are met in a professional and dignified manner at all times.

I would be grateful if you could sign and return the slip below once you have read the guidelines and agree to the school carrying out 'intimate care' procedures when necessary.

Yours sincerely,

Head of School

I have read a copy of the School's 'Intimate Care Policy.'

I agree to the school carrying out 'intimate care' on my son/daughter when necessary.

I agree to provide the required equipment for them to carry this out.

Signed: _____

Name: _____

Name of child: _____

Date: _____

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 making sure 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

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Appendix 2 Intimate Care Plan

Appendix 3

TOILET TRAINING/CHANGING RECORD – To be completed after each intimate care activity

Intimate Care - Record Sheet								
Date	Time	Name of child	Nappy Checked	Ok	Soiled	Wet	Comments	Initials Both staff members

Additional Comments: