

**KETTLESHULME ST JAMES  
CE (VA) PRIMARY SCHOOL**

**INTIMATE CARE  
POLICY**

**AUTUMN 2024**

**Review Date – Autumn 2027**

**Non-Statutory Policy**

## **Introduction**

At Kettlethulme St James Primary School, we recognise that all children have different rates of development and differing needs during their time at school. Some of our pupils, especially those in our Early Years settings and those with SEND, may require intimate care, most often associated with continence. Intimate care refers to any care that involves toileting, washing, changing, touching or carrying out an invasive procedure to children's intimate personal areas.

The aim of this policy, which complies with [statutory safeguarding guidance](#), is to ensure that:

- Intimate care is carried out properly by staff
- The dignity, rights and welling of children are safeguarded
- Pupils who require intimate care are not discriminated against, in line with the Equality Act 2010
- Families 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 do so with guidelines that protect themselves and the pupils involved

## **Role of parents/carers**

For children who need routine intimate care (e.g. for toileting or toileting accidents), parents/carers will be asked to complete an 'Intimate Care Plan' (Appendix A)

## **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.

## **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:

- Training in the specific types of intimate care they undertake
- Regular safeguarding training

- Manual handling training (if necessary) that enables them to remain safe and for the pupil to have as much participation as possible
- Further advice as needed.

## **Best Practice Principles**

- The management of all children with intimate care needs will be carefully planned where appropriate / possible
- Where intimate care is planned permission must be obtained from parents. This may include Intimate Care Plans (if appropriate) and any other plans which identify the support of intimate care where appropriate.
- The most appropriate environment (e.g the toilets) should be selected to ensure privacy and dignity at all times. Care should always be undertaken with tact, sensitivity and in an unhurried manner.
- If washing is required, always use a disposable cloth or baby wipe and, where possible, encourage the child to attempt to wash / clean private parts themselves. Emphasis should be on staff providing the minimum level of assistance and intervention, compatible with the particular circumstances and the child's needs.
- If a pupil is naked in a public area (e.g having removed clothing) the first priority should be the pupil's physical safety. If safety is assured, reasonable attempts to maintain the pupil's privacy / dignity should be made for example by using screens or providing a cover up until such time as the pupil may be dressed again.
- Pupils who require their clothing to be changed, (e.g if it has become wet or dirty) should be encouraged to undress / dress themselves where possible and physical help should be kept to a minimum.
- The child who requires intimate care is treated with respect at all times; the child's welfare and dignity are of paramount importance. Each child's right to privacy will be respected.
- Staff will be supported to adapt their practice in relation to the needs of individual children taking into account physical needs, developmental changes such as the onset of puberty and menstruation.
- Individual Intimate Care Plans, if appropriate, will be drawn up for particular children as felt appropriate to suit the circumstances of the child.
- 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 them self as they can. This may mean, for example, giving the child responsibility for washing themselves.
- 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.
- Wherever possible staff should only care intimately for older/more aware pupils of the same sex.

## **Toilet training / accidents / continence**

We expect the majority of pupils to achieve independent toileting by the time they reach statutory school age. For most children parents have a responsibility to promote toilet training and whilst we will support parents in continuing planned toilet training programmes, we encourage families to take this responsibility seriously.

Accidents and unexpected soiling will sometimes occur. On these occasions there may not be a personalised care plan in place or prior parental authorisation. In some situations (eg: needing to

clean a young person after a toilet accident) and where the delay will not cause distress, phone permission can be sought. At other times, such as where the soiling may cause discomfort or distress or where the parent cannot be contacted, as part of our duty of care to the pupil, prompt action will be taken to ensure the dignity and comfort of the pupil.

### **Children, parents and staff all have responsibilities linked to this issue:**

- Children must be taught strategies to make their need for the toilet clear either verbally or using a sign or symbol.
- Staff who have children on toilet training programmes or long-term continence differences must ensure that relevant staff are aware and competent in maintaining programme consistency.
- Staff will ensure that all children have regular opportunities and encouragement to go to the toilet at suitable times during the day including when off the school site.
- All staff will ensure that any soiling incidents are dealt with quietly and respectfully to avoid any embarrassment for the child.
- Parents must keep children who are unwell away from school to reduce the chance of stomach bugs from spreading. Children should stay off school until the symptoms have stopped for 24 hours. Parents must also come to the school as quickly as possible to care for their child who has become unwell.

In the case of pupils with planned intimate care needs, parents will only be contacted in extreme cases where soiling is severe and/or linked to illness eg. sickness and diarrhoea where the soiling is not typical for that pupil. Parents may also be called where a child refuses to let a member of staff help change their clothing or continence product.

### **Toileting procedures**

Should older female pupils require support with sanitary care whilst toileting this will be detailed within their Intimate Care Plan.

The following principles are most commonly used, and will form the basis of most care plans:

- It is best practice to have two members of staff present
- It is usually not appropriate that a single individual carries out all the care needs for one pupil due to the potential risks around grooming, and over dependence. Therefore, wherever possible a pupil's intimate care needs will be attended to by a small number of regular staff who should be familiar to the child in order to promote dignity.
- Pupils at all stages of development will be actively encouraged to develop independence on every occasion of intimate care
- Intimate care will be carried out in the staff toilet
- Where possible pupils above statutory school age will be encouraged to stand during changing procedures; this affords increased dignity and can be a steppingstone to encouraging independence. Where a pupil requires changing in a prone position (for example younger children or those with mobility needs) this will form part of their Intimate Care Plan
- If a pupil requires creams to be applied during changing, they may be encouraged to do this themselves, for example by applying cream to some tissue and prompting the child to apply this. If this is not practical for the pupil, a detailed procedure for this procedure should be included in the care plan

- Staff undertaking intimate care will always wear gloves. Gloves should be disposed of in the sanitary bin, located in the staff toilet.
- Intimate care should always be undertaken in an area with suitable handwashing facilities and these should be used by both the staff member and the pupil during the care process.
- Nappies, continence products and other soiled items for disposal will be tied into a plastic nappy bag and disposed of in the sanitary bins.
- Each incidence of intimate care will be recorded, and individual records will be kept, in accordance with the Data Protection Policy, with the pupil's care plan so that it can be easily shared with parents or other agencies as required.

### **Safeguarding and Child Protection**

- All staff working at Kettleshulme St James CE Primary School will apply for an enhanced Disclosure and Barring Service (DBS) check prior to employment commencing and undertake regular Safeguarding and Child Protection training.
- All children will be taught personal safety skills carefully matched to their level of ability, development and understanding.
- Children should be encouraged to recognise and challenge inappropriate assistance and behaviour that erodes their dignity and self-worth. Staff should be encouraged to listen to the child at all times.
- Developmentally appropriate information for pupils on how to report concerns is available to all children.

### **Identifying and reporting concerns**

If a member of staff has any concerns about physical changes in a child's presentation, e.g. marks, bruises, soreness etc. they will immediately report concerns to the Designated Safeguarding Lead in school or Deputy Safeguarding Lead. Such incidents should be recorded promptly and accurately.

- 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, Child Protection/Managing Allegations procedures will be followed.
- If a child is hurt accidentally during an intimate procedure he or she should be reassured immediately, and the staff member should check that he or she is safe. The incident must be reported immediately to the Designated Safeguarding Lead or a Deputy Safeguarding Lead. Incidents should be recorded promptly and accurately.
- If a child appears sexually aroused, misunderstands or misinterprets an action/instruction in a manner which causes concern, the incident should be reported immediately to the Designated Safeguarding Lead or a Deputy Safeguarding Lead. Incidents should be recorded promptly and accurately.

## **Links with parents / other agencies**

- Partnership with parents is essential in relation to children needing intimate care. Much of the information required to make the process of intimate care as comfortable as possible is available from parents, including knowledge and understanding of any religious/cultural sensitivities.
- Positive links with other agencies such as the bladder and bowel service, Occupational therapy, Physiotherapy, Speech and language therapy will enable school-based plans to take account of the knowledge, skills and expertise of other professionals and will ensure the child's wellbeing and development remains paramount.
- Regular meetings with parents, and where appropriate health agencies will be arranged by school to ensure clarity in any plans around intimate care.
- Parents who have children wearing nappies or continence pads will be asked to supply appropriately sized nappies, continence pads, wipes and disposable bags. The school will supply gloves. Every effort will be made to ensure that the parent's choice of continence product is used, however a supply of spare continence products will also be supplied by school and may be used on occasion. We also require parents to supply specialist swimwear for those pupils without bowel continence.

## **Pupil Voice**

It is essential that all children, regardless of their age, developmental and communicative ability, are afforded the opportunity to have their voice heard regarding their own care. To this end Kettlethulme St James CE Primary School will:

- Where-ever practical, allow the child, to express a preference regarding the choice of their carer and if appropriate, sequence of care.
- Agree appropriate terminology for private parts of the body and functions to be used by staff.
- Some pupils may use non-standard terminology (for example terms generated within the family) for parts of the body and functions. It may provide the pupil with increased independence to use more standard terminology and if this is felt to be the case this will be discussed with the pupil and their family and will form part of the pupil's plan.

## **Communicating needs relating to intimate care**

- It is the responsibility of all staff caring for a child to ensure they are aware of the child's method and level of communication (words, signs, symbols, visuals).
- For pupils who communicate more fluently, either through verbal or augmentative systems, the opportunity to discuss the care process will be offered regularly.
- Where pupils cannot communicate verbally it may be possible to determine a child's wishes by observation of reactions to the intimate care.
- Where there is any doubt that a child is able to make an informed choice on these issues, the child's parents are usually in the best position to act as advocates.
- To ensure effective communication with the child, staff should ascertain the agreed method of communication and identify this in any Intimate Care Plan.

## **Annex 1 – Early years intimate care procedure**

The procedures detailed here are to ensure the safety of both the children in our care and the Early Years team.

### **Nappy Changing**

Nappies must be provided to the school from the parent/carer.

- All children should be changed as and when needed but at least two times daily
- All nappy changes must be recorded by the member of staff responsible and should include the following details;
  - Date and time
  - Child's name
  - Type of change: "W" (wet) OR "S" (soiled)
  - Staff member details
- A soiled or wet nappy must be changed as soon as a staff member is aware of the need
- When changing a nappy, staff must wear a disposable apron and disposable gloves. These must be removed and disposed of after each change
- A nappy sheet must be placed on the changing mat to lay the child down on. The mat should be cleaned using anti-bacterial spray after each change.
- Hands must be washed after each change
- All nappies and wipes must be disposed of in the bin provided

### **Potties**

- When children are using potties, staff are to give them privacy by sitting them out of sight of passers-by and other children using the toilet area.
- After use, staff must dispose of the waste immediately into a toilet.
- Potties must be cleaned with anti-bacterial cleaner.
- Children (and staff) must wash their hands after using the potty

### **Soiling**

If a child has a wetting or soiling accident whilst wearing clothes, the child must be changed immediately.

Soiled underwear/clothes should be placed in a nappy sack and located with the child's other belongings to be sent home. If underwear is particularly soiled/stained; they will be disposed of in a nappy sack and parents will be informed.

Parents should be informed of the incident.

## Appendix A

# Intimate Care Plan

For pupils who need regular support with toileting, washing and/or changing.

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| 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   |  |
| PARENT / 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.