

Nash Mills CofE Primary School

Intimate Care Policy

Reviewed: January 2025

Ratified: January 2025

Next Review: January 2028

Principles

Intimate care can be defined as any care which involves washing, touching or carrying out a procedure to intimate personal areas which most people usually carry out themselves, but some children are unable to do because of their young age, physical difficulties or other special needs. Examples include care associated with continence as well as more ordinary tasks such as help with washing, toileting or dressing.

The Governing Body will act in accordance with Keeping Children Safe in Education to safeguard and promote the welfare of pupils at this school. The Governing Body and Headteacher will act in accordance with the 'Keeping Children Safe in Education' legislation.

Our school takes seriously its responsibility to safeguard and promote the welfare of the children and young people in its care. Meeting a pupil's intimate care needs is one aspect of safeguarding.

This intimate care policy should be read in conjunction with the following

- Child Protection policy
- Health and Safety policy
- First Aid and Medication Policy
- Staff Code of Conduct

The child's welfare and dignity is of paramount importance. No child should be attended to in a way that causes distress or pain and care should be provided in a timely manner.

Staff Training and Guidance

Staff who provide intimate care at Nash Mills CofE Primary School are trained in Child Protection and will have had access to the Health and Safety Policy, which details information around moving and handling as well as best practice regarding infection control, including the need to wear disposable gloves and aprons where appropriate.

Every child's right to privacy will be respected. Careful consideration will be given to each child's situation to determine how many carers might need to be present when a child needs help with intimate care. All adults who assist children one-to-one must be employees of the school with Enhanced DBS clearance.

Staff will be supported to adapt their practice in relation to the needs of individual children taking into account developmental changes such as the onset of puberty and menstruation.

There is careful communication with each child who needs help with intimate care in line with their preferred means of communication (verbal, symbolic, etc.) to discuss their needs

and preferences. Where the child is of an appropriate age and level of understanding permission should be sought before starting an intimate procedure.

All children 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 his/herself as possible.

Wherever possible the expectation is that two members of staff should assist with an intimate procedure, seeking assistance from other staff to maintain appropriate ratios in classrooms. It is always advisable for members of staff to inform another adult when they are going to assist a child with intimate care.

Children who require regular assistance with intimate care have written Individual Learning Plans (ILP) or care plans agreed by staff, parents/carers and any other professionals actively involved, such as school nurses or physiotherapists. These plans include a full risk assessment to address issues such as moving and handling, personal safety of the child and the carer. This will be updated as necessary and managed by the INCO.

Where a care plan or ILP is not in place, parents/carers will be informed the same day if their child has needed help with meeting intimate care needs (eg: has had an 'accident' and soiled him/herself). Information on intimate care should be treated as confidential and communicated in person or by telephone. This will also be recorded on CPOMS.

Child Protection

The Governors and staff at Nash Mills CofE Primary School recognise that children with special needs and disabilities are particularly vulnerable to all types of abuse.

From a child protection perspective it is acknowledged that intimate care involves risks for children and adults as it may involve staff touching private parts of a child's body. It may be unrealistic to expect to eliminate these risks completely but in this school best practice will be promoted and all adults will be encouraged to be vigilant at all times.

Additional safeguards will be in place, for example through the school being sensitive to which staff support pupils; it would not normally be appropriate, for example, for a male to support an older female pupil. As an additional safeguard, staff involved in meeting intimate care needs will not usually be involved with the delivery of sex education to the same children, wherever possible.

Medical Needs

Children with disabilities might require assistance with invasive or non-invasive medical procedures such as the administration of medication, managing catheters or colostomy bags. These procedures will be discussed with parents/carers, documented in the ILP or care plan and will only be carried out by staff who have been trained to do so.

Any members of staff who administer first aid should adhere to the school's First Aid and Medication policy. If an examination of a child is required in an emergency aid situation it is advisable to have another adult present and seek the child's permission, with due regard to the child's privacy and dignity.