



Intimate Care Policy

2020-2023

This policy is reviewed every two years and was agreed by the Governing Body of Chellaston Junior School in Summer 2020 **and will be reviewed again in Summer 2023**

Signed: _____ Chair of Governors

Date: _____

Non-Statutory Policy

Chellaston Junior School

Intimate Care Policy

Introduction

- The Governors and staff take seriously their responsibility to safeguard and promote the welfare of the children and young people in their care. Meeting a pupil's intimate care needs is one aspect of safeguarding. 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.
- CJS is committed to ensuring that all staff responsible for the intimate care of children and staff will undertake their duties in a professional manner at all times. It is acknowledged that these adults are in a position of great trust.
- We that there is a need to treat all children, whatever their age, gender, disability, religion or ethnicity with respect when intimate care is given. The child's welfare and dignity is of paramount importance.
- No child should be attended to in a way that causes distress or pain.
- Staff will work in close partnership with parent/carers to share information and provide continuity of care.

Best Practice

- Staff who provide intimate care are trained to do so and are fully aware of best practice regarding infection control, including the need to wear disposable gloves and aprons where appropriate.
- 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.
- Staff involved in meeting intimate care needs will not usually be involved with the delivery of Relationships and Health education to the same children, wherever possible.
- We ensure careful communication with each child, 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.
- Staff will encourage each child to do as much for his/herself as possible.
- Children who require regular assistance with intimate care have written 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. Any historical concerns (such as past abuse) should be noted and taken into account.

- Where a care plan is not in place, parents/carers will be informed the same day if their child has needed help with meeting intimate care needs (e.g. xxx has had an 'accident' and soiled him/herself).
- It is recommended practice that information on intimate care should be treated as confidential and communicated in person - telephone or by sealed letter.
- 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.
- It is not always practical for two members of staff to assist with an intimate procedure as this does not take account of the child's privacy. It is advisable, however, for a member of staff to inform another adult when they are going to assist a child with intimate care.
- Wherever possible, the child will not be cared for by the same adult on a regular basis. This will ensure, as far as possible, that over-familiar relationships are discouraged from developing.
- Intimate care will take place in the disabled toilet where there is greater space.
- Wherever possible, staff should care for a child of the same gender. This is safe working practice to protect children and to protect staff from allegations of abuse.
- The religious views and cultural values of families should be taken into account, particularly as they might affect certain practices or determine the sex of the carer.

Physiotherapy

- Children who require physiotherapy, whilst at school, should have this carried out by a trained physiotherapist. If it is agreed in the Support Plan or care plan that a member of the school staff should undertake part of the physiotherapy regime (such as assisting children with exercises), then the required technique must be demonstrated by the physiotherapist personally. Written guidance must be sought by the school and must be updated regularly.
- School staff must not devise and carry out their own exercises or physiotherapy programmes.
- Any concerns about the regime or any failure in equipment should be reported to the physiotherapist.

Medical Procedures

- Children with disabilities might require assistance with invasive or non-invasive medical procedures. These procedures will be discussed with parents/carers, documented in the 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 will be appropriately trained. If an examination of a child is required in an emergency aid situation it is advisable to have another adult present.

Massage

- Massage may be used with children who have complex needs but only do so with the written consent of the parents of the child concerned.
- Massage undertaken by school staff will be confined to parts of the body such as the hands, feet and face in order to safeguard the interest of both adults and children.

Record Keeping

- A written record is kept when a child needs intimate care. (Appendix 1)
- If a child needs intimate care as part of an on-going care plan, then permission is obtained from parents/carers. (Appendix 2)



Date

Child's Name		
Child's Class		

Reason for Intimate Care

--

Actions Taken/By whom

--

Communication with Parents

--

Signed

Date

Member of Staff		
Member of SLT		

Permission for School to Provide Intimate Care



	Signed	Date of Birth
Child's Name		
Male/Female		
Parent/Carer Name		
Address		

Please tick:

I give permission to the school to provide appropriate intimate care support to my child, e.g. changing soiled clothing, washing and toileting.

I will advise the Head teacher of any medical complaint my child may have which affects issues of intimate care.

	Signed	Date
Parent/Carer		
Relationship to child		
School Staff (name)		
School Staff (signed)		