WATLING
ACADEMY

# Intimate Care Statement

## 1. Introduction

Intimate care refers to any care that involves toileting, washing, changing, touching or carrying out an invasive procedure to children's intimate personal areas.

This guidance aims to ensure that:

- Intimate care is carried out properly by staff, in line with agreed care plans
- The dignity, rights and wellbeing of every child 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 the needs of their child are taken into account
- Staff carrying out intimate care work do so within guidelines (i.e. health and safety, manual handling and safeguarding protocols) that protect themselves and the pupils involved

## 2. 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.

An individual intimate care plan will be agreed for students with anticipated or recurring intimate-care needs, including assistance with clothing, wiping, changing or transfers. Unexpected, one-off care will be recorded and reviewed if further support is likely to be needed. Where there isn't an individual 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 school staff will inform parents/carers afterward.

The school will share information with parents/carers as needed to ensure a consistent approach to the child's care. It is expected that parents/carers will also share relevant information with school staff regarding any intimate matters as needed.

## 3. Creating an individual Intimate Care Plan

Where an intimate care plan is required, it will be agreed in discussion between the school, parents/carers, the young person (if possible and appropriate) and any relevant health professionals.

The school will work with parents/carers to take their preferences on board to make the process of intimate care as comfortable as possible for the student. Particular consideration will be given to the best way to provide intimate care with sensitivity.

The plan will be reviewed at least annually, and sooner following changes in needs, equipment, staffing or the student's wishes, with parents/carers to ensure the child's needs are fully considered and appropriately planned for. Subject to their age and understanding, the views and preferences of the young person will also be taken into account.

## 4. Staff responsibilities and training

Any staff who have received appropriate training can be asked to provide intimate care. This includes members of the Healthcare team, Senior Leadership Team, teachers and associate staff.

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 whilst allowing the pupil to have as much participation in the process as possible
- Information regarding risk assessments relevant to the provision of intimate care
- Information regarding hygiene and health and safety procedures relevant to the provision of intimate care

## 5. Intimate care procedures

Two members of staff will be present whenever intimate care is provided and will be carried out in designated areas in school. These designated areas are:

- Ground floor accessible washroom
- First floor staff toilet
- Medical room

Intimate care will be provided by identified, appropriately trained staff who are familiar with the student's individual care plan. The student's wishes, privacy, dignity, cultural and religious needs, including preferences about the sex of staff providing care, will be discussed sensitively and recorded. The school will make reasonable efforts to accommodate these preferences but cannot guarantee same-sex staff. Where a preference cannot be met, suitable arrangements will be discussed with the student and parents/carers, documented and kept under review.

Any discomfort or objection will be taken seriously and addressed promptly. If a student expresses discomfort, distress or refusal, staff will pause when safe, maintain support and privacy, and follow the individual plan to seek appropriate advice.

When carrying out procedures, the school will provide staff with appropriate protective clothing and supplies e.g. gloves, aprons, cleaning products, biohazard disposal bags, and clinical waste disposal bins.

For students needing routine intimate care, the school expects parents to provide and maintain a good stock of necessary resources e.g. underwear, spare set of clothing Any soiled clothing will be contained securely and discreetly returned to parents/carers at the end of the day or earlier if appropriate.

## 6. Concerns about safeguarding

If a member of staff carrying out intimate care has concerns about changes in a student's appearance (e.g. marks, bruises, soreness), they will report this using the school's normal safeguarding procedures.

If a young person is hurt accidentally or there is an issue when carrying out the procedure, the staff member will report the incident immediately to the Headteacher.

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.

Concerns about a student's safety or welfare must be reported immediately to the DSL or deputy DSL and recorded promptly. Staff must not wait for the care checklist to be scanned. Concerns or allegations about staff must follow the school's staff-allegations or low-level concerns procedure. Allegations about the Headteacher must be reported to the appropriate governance lead. Where required, the school will follow LADO advice before investigating.

## Appendix 1 Intimate care staff checklist

Student name: _____ Date: _____

Lead staff: _____ Second staff: _____

Time start: _____ Time ended: _____

Second staff: tick once completed and the student is safe. Mark N/A if not applicable.

| Step | Check | Done |
|---|---|---|
| 1 | The current care plan and any relevant handling plan were checked. | |
| 2 | Both staff were trained and competent for the support required. | |
| 3 | Care was explained and the student's agreement sought. | |
| 4 | Privacy and dignity were maintained throughout. | |
| 5 | The student was encouraged to do what they could independently. | |
| 6 | Hands were cleaned before care began. | |
| 7 | Both staff completed required equipment checks before use (if used). | |
| 8 | The student was supported to communicate equipment comfort or concerns. | |
| 9 | Gloves and apron were worn as required for the care task. | |
| 10 | Each step was explained before touching or moving the student. | |
| 11 | Care was safe and observable, protecting dignity and safeguarding student and staff. | |
| 12 | Necessary contact that could not be seen was explained; safe support was maintained. | |
| 13 | Regular comfort and wellbeing check-ins took place throughout. | |
| 14 | Discomfort or a request to pause was responded to promptly and safely. | |
| 15 | Any transfers followed the student's assessed handling plan (if needed). | |
| 16 | Safe support was checked before removing equipment (if used). | |
| 17 | Clothing removal and cleaning followed the care plan (if needed). | |
| 18 | Gloves were changed and hands cleaned between dirty and clean tasks. | |
| 19 | Redressing followed the plan, with contact explained and observable where practicable. | |
| 20 | Both staff checked final comfort and positioning with the student. | |
| 21 | Clothing, supports and prescribed belts were checked (if applicable). | |
| 22 | PPE was removed safely and hands cleaned after care. | |
| 23 | Used equipment and the care area were cleaned. | |
| 24 | Concerns were recorded and reported promptly using the routes below. | |

**Exceptions / concerns / action taken (include who was informed and when):**

_____

_____

Lead staff signature: _____ Second staff signature: _____

**Safeguarding**: Alert the DSL or deputy DSL immediately to any concern about the student. Record facts and the student's words promptly. Concerns or allegations about staff must also follow the staff-allegations procedure: report to the Headteacher, or the designated governance lead if about the Headteacher. If the DSL is unavailable, follow the school's urgent escalation procedure. Do not delay reporting while completing or scanning this form.

**Hand directly to the Medical Room for secure scanning, filing and logging on the medical tracker. Keep completed forms secure.**

**Appendix 2**

# INTIMATE CARE CONSENT FORM

| PERMISSION FOR SCHOOL TO PROVIDE INTIMATE CARE | |
|---|---|
| **Name of Child** | |
| **Year and Tutor Group** | |
| **Date of Birth** | |
| **I give permission for the school to provide appropriate intimate care to my child (as detailed in individual care plan)** | |
| **I will advise the school of anything that may affect my child's personal care, including changes which will require a review of this intimate care plan** | |
| **I understand the procedures that will be carried out and will contact the school immediately if I have any concerns** | |
| **Name of Parent/carer** | |
| **Parent/carer signature** | |
| **Date** | |

**Appendix 3**

# INTIMATE CARE PLAN PROFORMA

| TO BE COMPLETED WITH PARENTS/CARERS | |
|---|---|
| **Name of Child** | |
| **Type of intimate care needed** | |
| **What can student do independently?** | |
| **Agreed communication method for student and staff.** | |
| **Student preferences e.g. staffing/privacy** | |
| **Any additional resources to provide from home? E.g. clothes/wipes/pillow** | |
| **How often will care be given** | |
| **Resources and equipment required** | |
| **Where will care take place** | |
| **Staff carrying out intimate care, including trained cover** | |
| **External professionals overseeing moving-handling** | |

| | |
|---|---|
| **plans/relevant healthcare plans** | |
| **Date for review of Plan and overseen by?** | |

Signed (parent/carer):_____

Signed (staff): _____

Date:_____