



Intimate Care Policy

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The pastoral care of our children is central to the aims, ethos and teaching programmes in Diamond Wood Community Academy and we are committed to developing positive and caring attitudes in our children. Our Intimate Care Policy is part of our collective pastoral and care policies. This policy is in line with multi-agency guidance as found in the Area Child Protection Committees' (ACPC) Regional Policy and Procedures (2005). It is our intention to develop independence in each child. All children need help. The principles and procedures apply to everyone involved in the intimate care of children.

Intimate care may be defined as an activity required to meet the personal care needs of each individual child in partnership with the parent, carer and the child. In school this may occur on a regular basis or during a one-off incident.

Diamond Wood Community Academy is committed to ensuring that all staff responsible for the intimate care of children will undertake their duties in a professional manner at all times. We recognise that there is a need to treat all our children with respect when intimate care is given. No child should be attended to in a way that causes distress or pain and adults and staff must be sensitive to each child's individual needs.

Intimate care is any care which involves one of the following:

1. Assisting a child to **change their clothes**
2. **Changing or washing a child** who has soiled themselves
3. Assisting with **toileting** issues
4. Supervising a child involved in **intimate self-care**
5. Providing **first aid** assistance
6. **Providing comfort** to an upset or distressed child
7. **Feeding** a child
8. Providing **oral care** to a child
9. Assisting a child who requires a specific **medical procedure** and who is not able to carry this out unaided. *

* In the case of a specific procedure on a child, suitably trained staff, who are assessed as competent, should undertake the procedure. Parents have the responsibility to advise the school of any known intimate care needs relating to their child.

Principles of Intimate Care

The following are the fundamental principles of intimate care upon which our policy guidelines are based:

- Every child has a right to be safe
- Every child has the right to personal privacy
- Every child has the right to be valued as an individual
- Every child has the right to be treated with dignity and respect

- All children have the right to be involved and consulted in their own intimate care to the best of their abilities
- All children have the right to express their views on their own intimate care and to have their views taken into account
- Every child has the right to have levels of intimate care that are appropriate and consistent

Assisting a Child to Change Their Clothes

On occasions an individual child may require some assistance with change if, for example, they have an accident at the toilet, gets wet outside or has vomited on their clothes etc.

Staff will always encourage children to attempt undressing and dressing unaided. However, if assistance is required this will be given.

Staff will always ensure that they have a colleague in attendance when supporting dressing/undressing and will always give the child the opportunity to change in private, unless the child is in such distress that it is not possible to do so. If staff are concerned in any way parents will be sent for and asked to assist their child and informed if the child becomes distressed.

In EYFS where staff are changing a child, the team need to be aware in order to ensure that ratios and supervision is adequate for the children both indoors and outdoors.

Changing a Child who has Soiled Themselves

If a child soils themselves in school a professional judgement has to be made whether it is appropriate to change the child in school, or request the parent/carer to collect the child for changing. In either circumstance the child's needs are paramount and they should be comforted and reassured throughout. The following guidelines outline our procedures but we will also seek to make age-appropriate responses.

- The child will be given the opportunity to change their underwear in private and carry out this process themselves.
- School will have a supply of wipes, clean underwear and spare uniform for this purpose.
- If a child is not able to complete this task unaided school staff will gain the child's consent, and, on the basis of loco-parentis and our duty of care to meet the needs of the child, we will assist the child with any intimate care. A chaperone must also be present.
- The member of staff who has assisted a pupil with intimate care will take into account:
 - **Child Protection/Safeguarding Guidelines**
Ensure that the action you are taking is necessary. Get verbal agreement to proceed.
 - **CARE – CONCERN – COMMUNICATE**
 - **Pastoral Care Procedures**
Ensure the child is happy with who is changing them
Be responsive to any distress shown

- **Basic Hygiene Routines**

- Always wear protective disposable gloves

- Seal any soiled clothing in a plastic bag for return to parent

- School staff will attempt to contact the emergency contact to inform them of the situation.
- A record will be made in the “Record of Intimate Care” file, held in the changing areas. See Appendix 1.
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Providing Comfort or Support to a Child

There are situations and circumstances where children seek physical comfort from staff (particularly children in Early Years). Where this happens staff need to be aware that any physical contact must be kept to a minimum. When comforting a child or giving reassurance, staff must ensure that at no time can the act be considered intimate. If physical contact is deemed to be appropriate, staff must provide care which is professionally appropriate to the age and context. Staff must abide by our Touch Statement, see Appendix 2.

If a child touches a member of staff in a way that makes them feel uncomfortable this can be gently but firmly discouraged in a way which communicates that the touch, rather than the child, is unacceptable. If a child touches a member of staff, as noted above, this should be discussed, in confidence with the Safeguarding Officer, Head Teacher or Deputy Head Teacher.

Assisting a Child who Requires a Specific Medical Procedure and Who is Unable to Carry Out this Unaided

Our Administration of Medications Policy outlines arrangements for the management of the majority of medications in school, following the child’s individual Health Care Plan. Copies of all Health Care Plans can be found in the Office, Staff Room and First Aid Room.

Parent Permission Must be Given before Any Medication is Dispensed in School – This Form Is Also Available from the Office

A small number of children will have a significant medical needs and in addition to the arrangements included in our Administration of Medications Policy, they will have an Individual Health Care Plan. This Care Plan will be formulated by the Wellbeing Officer. If required, school staff will receive appropriate training.

School Responsibilities

All members of staff working with children are checked by the school. This includes students on work placement and volunteers who may be left alone with children. Vetting includes Enhanced check by the Disclosure and Barring Service and two references for staff members.

All staff will be familiar with the intimate care policy and other Pastoral Care Policies of the school.

Where anticipated, intimate care arrangements are agreed between the school and parents and, when appropriate and possible, by the child's Care Plan signed by the parent. **Only in an emergency would staff undertake any aspect of intimate care that has not been agreed by parents and school.** Parents would then be contacted immediately. The views of all relevant parties should be sought and considered to inform future arrangements.

If a staff member has concerns about a colleague's intimate care practice, he or she must report this to the Head Teacher who will then act or investigate accordingly and may need to report the incident to the LADO. If the concern is in regard to the Head Teacher it should be reported to the Chair of Governors, who will then report the incident to the LADO.

Guidelines for Good Practice

All children have the right to be safe and to be treated with dignity and respect. These guidelines are designed to safeguard children and staff. They apply to every member of staff involved with the intimate care of children.

Young children and children with special educational needs can be especially vulnerable. Staff involved with their intimate care need to be particularly sensitive to their individual needs.

Members of staff also need to be aware that some adults may use intimate care, as an opportunity to abuse children. It is important to bear in mind that some forms of assistance can be open to misinterpretation. Adhering to the following guidelines of good practice should safeguard both children and staff.

- 1. Involve the child in the intimate care.** Try to encourage a child's independence as far as possible in their intimate care. Where a situation renders a child fully dependent, talk about what is going to be done and, where possible, give choices. Check your practice by asking the child or parent about any preferences while carrying out the intimate care.
- 2. Treat every child with dignity and respect and ensure privacy appropriate to the child's age and situation.** Care should not be carried out by a member of staff working alone with a child.
- 3. Make sure practice in intimate care is consistent.** As a child may have multiple carers a consistent approach to care is essential. Effective communication between all parties ensures that practice is consistent.
- 4. Be aware of your own limitations.** Only carry out activities you understand and feel competent with. If in doubt, ask. Some procedures must only be carried out by members of staff who have been formally trained and assessed.
- 5. Promote positive self-esteem and body image.** Confident, self-assured children who feel their bodies belong to them are less vulnerable to sexual abuse. The approach you take to intimate care can convey lots of messages to a child about their body worth. Your attitude to a child's intimate care is important. Keeping in mind the child's age, routine care can be both efficient and relaxed.

- 6. If you have any concerns you must report them.** If you observe any unusual markings, discolouration or swelling, report it immediately to one of the Designated Safeguarding Leads. Body Maps are available if necessary.
- 7. Make a written record of the care.** A child who receives regular intimate care will have their own "Record of Intimate Care", to be filled in daily. If a child requires intimate care in an exceptional circumstance, staff involved must fill in a "Record of Intimate Care" in the file held in the changing areas.

If a child is accidentally hurt during intimate care or misunderstands or misinterprets something, reassure the child, ensure their safety and report the incident immediately to one of the Designated Safeguarding Leads. Report and record any unusual emotional or behavioural response by the child. A written record of concerns must be made available to parents and logged on CPOMS.

Working with Children of the Opposite Sex

There is positive value in both male and female staff being involved with children. Ideally, every child should have the choice for intimate care but the current ratio of female to male staff means that assistance will more often be given by a woman. The intimate care of boys and girls can be carried out by a member of staff of the opposite sex with the following provisions:

- When intimate care is being carried out, all children have the right to dignity and privacy, i.e. they should be appropriately covered, the door closed or screens/curtains put in place.
- If the child appears distressed or uncomfortable when personal tasks are being carried out, the care should stop immediately. Try to ascertain why the child is distressed and provide reassurance.
- Report any concerns to one of the Designated Safeguarding Leads and logged on CPOMS.
- Parents must be informed about any concerns.

Communication with Children

It is the responsibility of all staff caring for a child to ensure that they are aware of the child's method and level of communication. Depending on their maturity and levels of stress children may communicate using different methods; words, signs, symbols, body movements, eye pointing, etc. to ensure effective communication:

- Make eye contact at the child's level
- Use simple language and repeat if necessary
- Wait for response
- Continue to explain to the child what is happening even if there is no response
- Treat the child as an individual with dignity and respect.

Record of Intimate Care

Name of Child _____

Week Commencing _____

Day	Time	Care Given	Main Carer Signature	Chaperone Signature	Child *	Child's Signature
Monday					 	
Tuesday					 	
Wednesday					 	
Thursday					 	
Friday					 	

* Tick the happy face if you are happy, tick the sad face if you are sad

Appendix 2

Diamond Wood Community Academy Touch Statement

It is really important that you read this statement to appreciate the reasons why you choose to hold/touch children and the appropriate ways in which you should do so.

Why Do We Use Touch?

We may choose to hold children for a variety of reasons, but in general we would normally do so for either comfort or reward. We may also need to physically touch, guide or prompt pupils if they require personal care, assistance with writing, eating, dressing etc.

How Do We Use Touch?

At DWCA we discourage staff from 'front on' hugging. You may do a 'sideways on' hug by putting your hands on the children's shoulders and offering praise and guidance as appropriate. This can either be done standing or sitting. It is inevitable that infant age children will grab staff around their middle. Don't panic if this occurs, just gently guide the child away by taking their hands away from your body.

Hand-Holding

This is perfectly acceptable when the hand-holding is compliant. We recognise that children sometimes enjoy being able to hold hands with adults around them. However, if the hand-holding is being used by an adult as a method of control to move children, this can become a restraint. You should not hold a child by the wrist under any circumstances.

At times, children maybe in crisis or distressed and you may have to hold a child in a way that contradicts the advice given above. These should be exceptional circumstances only, and should be witnessed by another member of staff.

Lap-Sitting

At our school we actively discourage lap-sitting. Children should be taught to seek comfort and attention through other means. If a child attempts to sit on your lap, explain to them that this is not what we do here and ask them to sit next to you if it is appropriate.

Lifting & Carrying Children

Staff should never lift or carry children in school. You are at risk of spine and back injury. If you were to fall you are also putting the child at risk. Carrying children can also be deemed as an intimate act. You could be putting yourself at risk of accusations that could affect your career.

Please familiarise yourself with the Staff Code of Conduct policy. Be aware of your personal and professional conduct in and around school. Consider health and safety and encourage children to develop their own awareness and independence as much as possible. These guidelines are for your protection as well as the children.

Nursery Claus/SEND clause:

We recognise that staff will occasionally have to move and handle children in a way that contradicts the above. In such occasions staff are encouraged to use their common sense and not take unnecessary risks when moving and handling pupils. It is your responsibility to identify manual handling hazards and if in doubt raise a concern with the senior leadership team where necessary.

Where manual handling tasks cannot be avoided you should carry out your own personal risk assessment by examining the task and decide what risk is associated with it. It should then be decided how this can be removed or reduced by adding control measures. Always ask for support from a colleague and never use manual handling techniques in isolation.

Note: All staff have a duty of care towards pupils in their care. In an emergency situation (e.g. evacuation in the event of fire etc.) both routine manual handling procedures may have to be adapted. Discuss all incidents with your line manager.

