



Hindhayes Infant School
Personal and Intimate Care Policy
April 2025

At Hindhayes, we believe success is based on the partnerships between pupils, staff and the parent community. We endeavour to enrich and develop each child to be a successful individual that will become an active community citizen of the future.

Approved on: _____

Signed: _____

Role: _____

Purpose of Policy

At Hindhayes School we are committed to ensuring that all staff responsible for the intimate care of children will undertake their duties in a professional manner at all times. No child is excluded from our school that, for whatever reason, may not be toilet trained and we also work with parents/carers to support toilet training where necessary:

- To ensure that the school works in partnership with parents/carers to ensure they fully understand the schools policies and procedures when dealing with intimate care.
- To ensure that the provision of intimate personal care fully meets the needs of the schools child protection policy.
- To ensure that the intimate care of children is done in a sympathetic manner and the children are treated with respect and dignity.
- To consider every child's needs individually, taking full account of their age, special needs, disability and gender ensuring everything will be done to protect dignity.

Principles of Intimate care

The following are principles upon which this policy and guidelines are based. At Hindhayes, we believe every child has the right to:

- Be kept safe
- Personal privacy
- Be valued as an individual
- Involvement in their own personal care
- Be treated with dignity and respect
- Express their views on their own intimate care and to have their views taken into account
- Privacy and a professional approach from all staff that meets their needs
- Be accepted for who they are without regard to age, gender, ability or race

Who does it apply to?

This policy applies to everyone involved in the intimate care of children. These guidelines should be read in conjunction with other policies the school may hold, for example:

- Child Protection/Safeguarding policy
- Low Level Concerns and Whistle Blowing Policy
- Health and Safety Policy
- Moving and handling policy
- SEND policy
- Relationship Policy
- School Code of Conduct

Responsibilities

The delivery of intimate care should be undertaken by professionally qualified staff and governed by their professional code of conduct. Staff must support the child in the achievement of the highest level of autonomy that is possible given their age and ability. Where necessary individual care plans will be drawn up for individual children. Senior leaders ensure that all staff undertaking the intimate care of children are familiar with and understand the 'Intimate Care' policy and guidelines. The Intimate Care Policy will be highlighted as part of the Induction Process for all new members of staff. If a staff member has concerns about a colleague's intimate care practice, they must report this to the 'Designated Safeguarding Lead ' or use the school's Whistle Blowing policy or Low Level Concerns Policy

Definition of Intimate Care

"Intimate care" is defined as any involvement that requires touching or the carrying out of invasive procedures to support the personal care needs of a child. Where possible, children will carry out these tasks independently, however with a small number of learners especially those with a physical/learning disability or medical need, intimate care support may be required on either a regular or intermittent basis in order to address and support the need. Care may involve help with eating, drinking, dressing and toileting.

Whilst toileting, intimate care procedures may be carried out by one member of staff (2 where appropriate) changing areas should also be clear and visible to other members of staff. Staff will record within an intimate care log. If one member of staff is changing a child, they must let another member of staff know that this is what they are doing and where they are doing it.

Facilities

All staff involved with intimate care should use the following facilities as appropriate

- adjustable changing beds
- protective clothing and disposable gloves
- labelled bins, waste bins for incineration
- supplies of suitable cleaning materials with COSHH certification.
- Access to moving and handling training as needed

Key Procedures

Staff will encourage each child to do as much as they can for themselves e.g. giving the child responsibility for washing themselves. Toileting plans will always work towards independence for the pupil.

The needs and wishes of children and parents will be considered wherever possible within the constraints of staffing and equal opportunities legislation.

The school's Child Protection policy and procedures will be adhered to at all times.

Best Practice

Pupils will be supported to do as much as they can for their own intimate care needs, taking into account their age and ability.

The pupil's preferred means of communication will always be used.

Schools staff will always explain or seek the permission of the pupil before starting an intimate care procedure, according to their age and stage of understanding.

Staff will be trained in personal care according to the needs of the pupil (e.g. moving and handling)

Staff will be aware of best practice regarding infection control, including the requirement to wear disposable gloves and aprons where appropriate, as well as disposing of waste appropriately.

Staff will be supported to adapt how they support individual pupils when changes happen.

Only employees of the school will support pupils with intimate care (not students or volunteers). They will have the usual range of safer recruitment checks.

All staff will be aware of the appropriate policies including safeguarding and confidentiality. Sensitive information will only be shared with those who need to know.

Record Keeping

School staff will inform another member of staff when they are going to assist a pupil with intimate care on their own.

A written record will be kept every time a child has an invasive medical procedure, this will be kept in an agreed format.

Accurate records will also be kept when a child receives intimate care. These will be brief but should include a date, time and any comments such as changes in the child's behaviour. It will be clear who is present in every case.

Records should be available to parents on request.

If a pupil without an intimate care plan has an 'accident' whilst at school and they need the same help with intimate care, the parents/carers will be informed of this on the same day.

Additional information

- For children requiring intimate care as part of a medical care plan or SEND need, there should be a core team of staff who have built a trusting and secure relationship with the child and who can be called upon when needed for support – this is to ensure that those children with specific plans can still have these facilitated in the event of staff absence/PPA etc.
- Staffing provisions and arrangements for changing/toileting must be made for external visits and trips and these should be discussed with parents/carers – this may include the need to do a pre-visit to assess the toilet facilities. Children should not be excluded from trips/events due to their toileting need, nor can parents be expected to be called upon to support.

Child Protection

The school's child protection policy will always be adhered to. Intimate care involves risks for adults and children. As such, best practice will be followed and staff will be encouraged to be vigilant at all times, seek advice where relevant and take account of safer working practices. Where appropriate, pupils will be taught personal safety skills according to their age and stage of understanding.

If a pupil becomes particularly/unusually distressed or unhappy about being cared for by a particular member of staff, this will be reported to the class teacher or head teacher to be investigated at an appropriate level.

There is no legal requirement for two adults to be present for toileting/changing and such a requirement might be impractical. The normal process of changing a child who has had an accident should not raise child protection concerns, and there are no regulations that indicate that a second member of staff must be available to supervise the changing process to ensure abuse does not take place.

If there is a known risk of false allegations by a child, then a single practitioner should not undertake changing. Personal and intimate care of children with special needs and/or disabilities will be undertaken with sensitivity, the need to protect staff and in accordance with the needs and wishes of the child and parent/carer wherever practicable.