

Shelton Infant School

Intimate Care Policy

Introduction

Shelton Infant School 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 children with respect and dignity when intimate care is given. No child should be attended to in a way that causes distress, embarrassment or pain.

Children's dignity will be preserved and a high level of privacy, choice and control will be provided to them. Staff that provide intimate care to children have a high awareness of child protection issues. Staff will work in partnership with parents/carers to provide continuity of care.

This Intimate Care Policy has been developed to safeguard children and staff. It applies to everyone involved in the intimate care of children.

Definition

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 pupils are unable to do because of their young age, physical difficulties or other special needs. In most cases such care will involve procedures to do with personal hygiene and the cleaning of associated equipment as part of the staff member's duty of care. In the case of specific procedures only the staff suitably trained and assessed as competent should undertake the procedure.

Our Approach to Best Practice

The management of all children with intimate care needs will be carefully planned. The child who requires care will be treated with respect at all times; the child's welfare and dignity is of paramount importance.

Staff who provide intimate care are trained to do so (including Child Protection and Moving and Handling) and are fully aware of best practice. Suitable equipment and facilities will be provided to assist children who need special arrangements following assessment from physiotherapist/ occupational therapist.

Staff will be supported to adapt their practice in relation to the needs of individual children. Staff will encourage each child to do as much for him/herself as they are able.

Pupils who require regular assistance with intimate care should have written individual care plans agreed by staff, health care professionals (where appropriate), parents/carers and any other professionals who are actively involved. The plan will be reviewed as necessary, but at least annually.

Where a care plan or IEP is not in place, parents/carers should be informed the same day if their child has needed help with meeting intimate care needs (e.g. has had an accident and wet or soiled him/herself).

An individual member of staff must inform another appropriate adult when they are going alone to assist a pupil with intimate care.

Adults who assist pupils with intimate care must be employees of the school, not students or volunteers, and therefore have the usual range of safer recruitment checks, including enhanced DBS checks.

Staff will be fully aware of best practise regarding infection control, including the requirement to wear disposable gloves and aprons where appropriate.

No member of staff will carry a mobile phone, camera or similar device whilst providing intimate care.

Individual intimate care plans will be drawn up for children as appropriate to the needs of the child. A record of intimate care will be kept in the disabled toilet for school/utility room for nursery and must be completed in all instances where bodily fluids are involved. If the child's clothes are wet due to other circumstances e.g. slipped in a puddle the change will only need to be recorded if underclothes are changed.

Children attending in nappies/pull-ups

Parents will be responsible for supplying all nappies or pull-ups, wipes and nappy bags.

The Protection of Children

Child Protection Procedures and Multi-Agency Protection procedures will be adhered to. If any member of staff has concerns about physical changes to a child's presentation, e.g. marks, bruises, soreness etc. s/he will immediately report concerns to a Designated Safeguarding Lead.

This policy will be reviewed in September 2026.