



# CHRIST THE SAVIOUR C.E. PRIMARY SCHOOL



Each of you should use whatever gift you have received to serve others, as faithful stewards of  
God's grace in its various forms

*1 Peter 4:10*

## Intimate Care Policy

Policy to be approved by	Full Governing Body
Policy last reviewed	April 2025
Policy ratified and adopted by the Full Governing Body	October 2014
Policy due for review	Summer 2028

## **Intimate Care Policy**

**Christ the Saviour School is fully committed to safeguarding children and young people and requires all staff and volunteers to share this commitment.**

1. Welfare support staff, teachers, teaching assistants and nursery staff may undertake care tasks of an intimate nature such as nappy changing, cleaning a child after soiling or wetting, support with medical conditions of an intimate nature. In such instances, it is important that great care is taken to maintain the child's dignity and safeguarding guidance is at the forefront of the staff member's mind.
2. Occasionally other older pupils need care too and this may require equal protection of their dignity and safety and this policy should be used.
3. Digital media or video coverage is never permitted in the areas where young people may be changing. Staff are never allowed to use digital equipment in areas where young people may need intimate care or are getting changed. Staff are not permitted to use mobile phones in any areas of the school where children are present.

### **4. Introduction**

- a. Staff who work with young children or children/young people will realise that the issue of intimate care is a difficult one and will require staff to be respectful of children's needs.
- b. Intimate care can be defined as care tasks of an intimate nature, associated with bodily functions, body products and personal hygiene which can demand direct or indirect contact with or exposure of the genitals.
  - i. Examples include care associated with continence
  - ii. menstrual management
  - iii. as well as more ordinary tasks such as help with washing or bathing.

### **5. Protecting Dignity**

- a. Children's dignity will be preserved and a high level of privacy, choice and control will be provided to them.
- b. Staff who provide intimate care to children have a high awareness of child protection/ safeguarding issues.
- c. Staff behaviour is open to scrutiny and staff must work in partnership with parents to provide continuity of care to children/young people wherever possible.
- d. Staff deliver a full personal safety curriculum, as part of Personal, Social, Health and Citizenship Education, to all children as appropriate to their developmental level and degree of understanding. This work is shared with parents who are encouraged to reinforce the personal safety messages within the home.
- e. 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.

- f. We recognise that there is a need to treat all children with respect when intimate care is given. No child should be attended to in a way that causes distress or pain.

## **6. Our Approach to Best Practice**

- a. All children who require intimate care are treated respectfully at all times; the child's welfare and dignity is of paramount importance.
- b. Staff who provide intimate care are trained to do so (including Child Protection/Safeguarding and Health and Safety training) and are fully aware of best practice.
- c. Apparatus will be provided to assist with children who need special arrangements following assessment from physiotherapist/ occupational therapist as required.
- d. 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 in the upper years of the school.
- e. Sanitary bins are provided in pupil loos.
- f. There is careful communication with each child who needs help with intimate care in line with their preferred means of communication (verbal, visual, etc.) to discuss the child's needs and preferences. The child is aware of each procedure that is carried out and the reasons for it.
- g. As a basic principle children will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each child to do as much for himself/herself as they can. This may mean, for example, giving the child responsibility for washing themselves. In some instances, individual intimate care plans will be drawn up for particular children as appropriate to suit the circumstances of the child. These plans will include a full risk assessment to address issues such as moving and handling, personal safety of the child and the carer.
- h. Each child's right to privacy will be respected. Careful consideration will be given to each child's situation to determine how many staff might need to be present when a child needs help with intimate care. There will always be two adults present when intimate care is being given. Adults are not left 1:1 with a child during intimate care provision. This is to safeguard both the adult and the pupil.
- i. Parents will be involved with their child's intimate care arrangements on a regular basis; a clear account of the agreed arrangements will be recorded on the child's care plan. The needs and wishes of children and parents will be carefully considered alongside any possible constraints; e.g. staffing and equal opportunities legislation.
- j. If a child needs a shower after a toileting accident, the school will attempt to phone the parent and let them know.
- k. The school will provide clean replacement garments which parents can return to school.

- l. Each child/young person with regular intimate needs will have an assigned member of staff, usually class teacher, Assistant Headteacher for the phase or the SENCO, to act as an advocate to whom they will be able to communicate any issues or concerns that they may have about the quality of care they receive.
- m. For more complex needs pupils, who have EHCPs, who are not toilet trained and need intimate care, we are led by Occupational Therapists. We follow professional advice and work in collaboration with parents to support toilet training.

## **7. The Protection of Children**

- a. Safeguarding/Child Protection Procedures procedures will be accessible to staff and adhered to by all.
- b. Where appropriate, all children will be taught personal safety skills carefully matched to their level of development and understanding.
- c. If a member of staff has any concerns about physical changes in a child's presentation, e.g. marks, bruises, soreness etc. they will report them immediately to the Designated Lead Person in line with our Safeguarding Policy
- d. A clear record of the concern will be completed and referred to social care if necessary.
- e. If a child becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be looked into and outcomes recorded. Parents will be contacted at the earliest opportunity as part of this process in order to reach a resolution.
- f. If a child makes an allegation against a member of staff, all necessary procedures will be followed *[see Safeguarding/Child Protection Procedures and especially the managing allegations against a member of staff]*.