

St. John Paul II Multi Academy

Intimate Care Policy

SS Mary and John Catholic Primary School

Date of last review	14.1.25	Review period	Two yearly
Date of next review	January 27	Owner	SS Mary and John
Type of policy	Non-statutory	Governor approval	February 2025

Summary of changes	Date



Intimate Care Policy

1. Principles

- The Governing Body will act in accordance with Section 175 of the Education Act 2002 and Keeping Children Safe in Education to safeguard and promote the welfare of pupils at this school.
- This school takes seriously its responsibility to safeguard and promote the welfare of the children and young people in its care. Meeting a pupil's intimate care needs is one aspect of safeguarding.
- The Governing Body recognises its duties and responsibilities in relation to the Disability Discrimination Act which requires that any child with an impairment that affects his/her ability to carry out day-to-day activities must not be discriminated against.

This intimate care policy should be read in conjunction with the following policies:

- Safeguarding policy
- Health and safety policy and procedures
- Policy for the administration of medicines
- Special Educational Needs policy
- Procedures and policy on physical restraint
- Staff code of conduct or guidance on safe working practice.

SS Mary & John Catholic Primary 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. It is acknowledged that these adults are in a position of great trust.

SS Mary & John Catholic Primary School recognises that there is a need to treat all children, whatever their age, gender, disability, religion or ethnicity, with respect when intimate care is given.

Staff will work in close partnership with parent/carers to share information and provide continuity of care.

2. 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 children are unable to do because of their young age, physical difficulties or other special needs. Examples include care associated with continence and menstrual management as well as more ordinary tasks such as help with washing, toileting or dressing. It also includes supervision of children involved in intimate self-care.

3. Best Practice

- a. Staff who provide intimate care are trained to do so in conjunction with child protection, health and safety training, moving and handling and are fully aware of best practice regarding infection control, including the need to wear disposable gloves, and aprons where appropriate.
- b. 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.
- c. As an additional safeguard, staff involved in meeting intimate care needs will not usually be involved with the delivery of relationships and sex education to the same children.
- d. There is careful communication with each child who needs help with intimate care in line with their preferred means of communication (verbal, symbolic, etc.) to discuss their needs and preferences. Where the child is of an appropriate age and level of understanding permission should be sought before starting an intimate procedure.
- e. All 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 themselves as possible
- f. All identified pupils at SS Mary & John Catholic Primary School have individual care plans agreed by staff, parents/carers and any other professionals actively involved.
- g. Where a care plan does not include Intimate care, parents/carers will be informed the same day if their child has needed help with meeting intimate care needs (eg. has soiled him/herself). Information on intimate care is treated as confidential and communicated in person, by telephone or by sealed letter, not through the home/school diary.



- h. Every child's right to privacy will be respected. Careful consideration will be given to each child's situation to determine how many carers might need to be present when a child needs help with intimate care.
- i. Except in an emergency, two members of staff are present to assist with intimate procedures at all times.
- j. Wherever possible the same child will not be cared for by the same adult on a regular basis; there will be a rota of carers known to the child who will take turns in providing care. This will ensure, as far as possible, that over-familiar relationships are discouraged from developing, while at the same time guarding against the care being carried out by a succession of completely different carers.
- k. Wherever possible staff should care for a child of the same gender. However, in some circumstances this principle may need to be waived; for example, female staff supporting boys in a primary school as no male staff are available. Male members of staff should not provide routine intimate care (such as toileting, changing or bathing) for adolescent girls.
- l. The religious views and cultural values of families should be taken into account, particularly as they might affect certain practices or determine the gender of the carer.
- m. All staff should be aware of the school's confidentiality policy. Sensitive information will be shared only with those who need to know.

4. Safeguarding

- a. The Governors and staff at SS Mary & John Catholic Primary School recognise that children with special needs and disabilities are particularly vulnerable to all types of abuse.
- 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. unexplained marks, bruises, soreness, etc,... s/he will immediately report concerns to the DSL, who will respond in accordance with the Safeguarding Policy.
- d. If a child or any adult makes an allegation against, or has concerns about, an adult working at the school, this will be reported to the Principal without delay (or by the Chair of Governors if the concern is about the Principal) who will liaise with the local authority designated officer(LADO)

5. Physiotherapy

- a. Children who require physiotherapy whilst at school should have this carried out by a trained physiotherapist. If it is agreed in the IEP or care plan that a member of the school staff should undertake part of the physiotherapy regime (such as assisting children with exercises), then the required technique must be demonstrated by the physiotherapist personally, written guidance given and updated regularly.
- b. Under no circumstances should school staff devise and carry out their own exercises or physiotherapy programmes.
- c. Adults (other than the physiotherapist) carrying out physiotherapy exercises with pupils should be employees of the school.
- d. Any concerns about the regime or any failure in equipment should be reported to the physiotherapist.

6. Medical Procedures

- a. Children with disabilities might require assistance with invasive or non-invasive medical procedures such as the administration of rectal medication, managing catheters or colostomy bags. These procedures will be discussed with parents/carers, documented in the IEP or care plan and will only be carried out by staff who have been trained to do so.
- b. Any members of staff who administer first aid should be appropriately trained. If an examination of a child is required in an emergency aid situation it is advisable to have another adult present, with due regard to the child's privacy and dignity.



7. Nappy Changing Procedure

- Staff to wear disposable gloves and aprons while dealing with the incident
- Soiled nappies to be double wrapped and placed in a hygienic disposal unit
- Changing area to be cleaned after use
- Hot water and liquid soap available to wash hands as soon as the task is completed, alcohol gel also available in toilet areas.
- Paper towels available for drying hands.

8. Parental Responsibilities

Parents will change their child, or assist them in going to the toilet, at the latest possible time before coming to school.

Parents will provide spare nappies, incontinence pads, medical bags, wet wipes and a change of clothing in case of accidents.

A copy of this policy will be read and signed by parents to ensure that they understand the policies and procedures surrounding intimate care.

Parents will inform the school should their child have any marks or rashes.

Parents will come to an agreement with staff in determining how often their child will need to be changed, and who will do the changing.

9. Swimming

Pupils in school regularly participate in swimming lessons. During these lessons, pupils are entitled to privacy when changing; however, some pupils will need to be supervised during changing.

Parental consent will be obtained before assisting any pupils in changing clothing before and after swimming lessons.

Details of any additional arrangements will be recorded in the pupil's individual intimate care plan.

10. Offsite visits

Before offsite visits, including residential trips, the pupil's individual intimate plan will be amended to include procedures for intimate care whilst off the school premises.

Staff will apply all the procedures described in this policy during residential and off-site visits.

Meetings with pupils away from the school premises, where a chaperone is not present, will not be permitted, unless approval has been obtained by the Executive Head Teacher or Head of School.

Consent from a parent will be obtained and recorded prior to any offsite visit.

11. Recording and Reporting

Any incidences where intimate care has been administered, in line with the care plan agreed, must be recorded on CPOMS.

12. Monitoring and Review

This policy is reviewed every two years by the senior leadership team and the DSL.

All changes are communicated to relevant stakeholders.

The scheduled review date for this policy is January 2027.



Appendix A



SS Mary & John Catholic Primary School

Intimate Care Plan

Name of child:	
Date of plan:	
Name of person(s) to change the child:	
Name of person(s) to change the child if main adult is unavailable:	
Where the changing will take place:	
What resources and equipment will be used:	
Who will provide the resources and equipment that will be used:	
Training requirement for staff:	
Disposal of product:	
Infection control measures:	
Special arrangements for trips/outings:	
When will the plan be reviewed:	



Appendix B



SS Mary & John Catholic Primary School

Intimate Care Plan Agreement

The parent

- I agree to putting my child in pull ups rather than nappies where possible.
- I agree to ensure that my child is changed at the latest possible time before being brought into school
- I will provide the school with spare nappies/pull ups and a change of clothing.
- I understand and agree the procedures that will be followed when my child is changed at school including the use of any cleanser or wipes.
- I agree to inform the school should my child have any marks or rashes.
- I agree to a 'minimum change' i.e. the school will not undertake to change my child more frequently than if s/he was at home.
- I agree to review arrangements should this be necessary.

Signed: _____ (Parent/Carer)

Name: _____ (Parent/Carer)

Date: _____

The school

- We agree to change the child during a single session should the child soil themselves or become uncomfortably wet.
- We agree to monitor the number of times the child is changed in order to identify progress made.
- We agree to report should the child be distressed or if marks/rashes are seen.
- We agree to review arrangements should this be necessary.

Signed: _____ (School member of staff)

Name: _____ (School member of staff)

Date: _____

