



# St. Aidan's Catholic Primary School

## Intimate Care Policy

**Adopted:** September 2023

**To be reviewed:** September 2025 (or sooner as appropriate).

## **Rationale**

Intimate care is any care which involves washing, touching or carrying out an invasive procedure (such as cleaning up after a child has soiled him/herself), that most children can carry out for themselves, but which some are unable to do due to physical disability, special educational needs associated with learning difficulties, medical needs or needs arising from the child's stage of development.

Given the nature of the school population at St. Aidan's intimate care will only need to be provided on an occasional basis and usually to the youngest children e.g. when a child has wet or soiled themselves.

Any child requiring or likely to require intimate care on a more regular basis e.g. as a result of a special need or long term illness, will have a Personal Care Management Plan which will outline the procedures to be followed.

### **Aims**

1. To ensure that children requiring intimate care receive such care in a timely and respectful manner, and in a way that enables them to feel safe and secure.
2. To ensure that children are treated as individuals and in such a way that protects their privacy and dignity.
3. To permit and promote the greatest level of self-care and independence for each child.
4. To ensure that staff providing intimate care have the necessary guidance and support to enable them to carry out their responsibilities effectively.
5. To ensure that parents / carers are clear about the school's approach, and have confidence that the school will act in the child's best interests.
6. To fulfil the school's obligations under the Disability Discrimination Act (DDA) 2005. This means that we are committed to ensuring equality of education and opportunity for disabled pupils. We aim to develop a culture of inclusion and diversity to enable disabled pupils to participate fully in school life, and will ensure that our policy and procedures for intimate care support the achievement of our aims in relation to disabled pupils. (See the school's Disability Equality Scheme for further details).

### **Guidelines**

1. The head teacher accepts responsibility, in principle, for staff to provide intimate care to children when required.
2. All staff dealing with intimate care are familiar with the school's Child Protection Policy and have received appropriate training. Staff are aware of the sensitivities around intimate care and are mindful of the need to act in accordance with the agreed procedures.
3. Intimate care is never provided by volunteers.
4. Where possible the child is asked for their consent for the care to be given, and their preference as to who the care is provided by is also taken into account.
5. Staff are sensitive to gender, religious and cultural issues around intimate care.
6. Care is provided at the point of need and undue delay is avoided.

7. The following procedures are followed when intimate care is required:

- The care is provided in an appropriate area. In the case of a child in Nursery, Reception or KS1 this is likely to be in the Wetroom toilet area. The adult disabled adult toilet will be used for other children in KS1, and the adult toilet next to the medical room for KS2.
- It is usually appropriate for the care to be provided by one member of staff, but it is important that a second member of staff is in close proximity. This ensures an appropriate balance between the child's right to privacy and the potential vulnerability of the staff member providing the care.
- If there isn't a member of support staff available in a classroom then the class teacher will send for another member of staff via the Headteacher or school office.
- The member of staff providing the care gives verbal re-assurance to the child, including providing a running commentary on what they are doing. The aim of this is to promote the well-being of the child as well as strengthen the protection for the member of staff provided through the presence of the second member of staff nearby.
- The child is encouraged to attend to their needs as far as possible on their own, provided that it is safe to do so. It may be possible to provide supervision and guidance, intervening only when necessary or if the child asks for help.
- The member of staff providing the care makes a brief written record in the class record book (name of child, care provided, reason, name of both members of staff, date). The Head or Deputy is also informed.
- The member of staff speaks to the child's parent to explain what has happened, and how the child's needs have been met.

8. In instances where regular care, specialist care or specialist equipment is required a Personal Care Management Plan will be developed. This will include provision for any specific training required by staff.

9. See also the school's Child Protection Policy.

Child's Name:

Signed by Parent



**Further Agency Information and Guidance Portage:**

<https://www.portage.org.uk/about/what-portage> **Toileting**

**Advice**

**NHS:**

<https://www.nhs.uk/conditions/pregnancy-and-baby/potty-training-tips/> **Institute of Health**

**Visiting:** [https://www.foundationyears.org.uk/files/2014/10/PT\\_Toilet-Training\\_V4.pdf](https://www.foundationyears.org.uk/files/2014/10/PT_Toilet-Training_V4.pdf) **ERIC –**

**Bladder and Bowel Health in Schools:** <https://www.eric.org.uk/healthy-bladders-and->

[bowels-at-school](https://www.eric.org.uk/healthy-bladders-and-bowels-at-school)

**Bladder and Bowel UK:**

<https://www.bbuk.org.uk/children-young-people/children-schools/>

