



Intimate Care Policy

The wellbeing of our school community is at the heart of all that we do and is linked to our Core Values of Belief, Effort, Community & Kindness. These values help us to better understand and improve the wellbeing of our school community with this policy, and all others, being consistent in promoting those values.

Approved by: [Name]

Date: [Date]

Last reviewed on: [Date]

Next review due by: [Date]

	St Ethelwolds's VA School
Date policy approved and adopted	
Review frequency	Annually
Next review date	
Head teacher	Paul Oliver
Designated Governor	
Designated Teacher	Mrs Rebecca Ellis (ALNCo)

Introduction

In toilet training development there is great variation from child to child. Children usually achieve continence between their second and fourth birthday. Most children, including those with a severe learning disability, can be trained to use the toilet.

With an increase in recent years in the number of three year olds starting in school that are not toilet trained, the greater the need for clear procedures for providing intimate care and defined roles. In some case there may be a lack of training or a developmental delay, however other children may have an underlying medical need. In either case, it is not permissible to refuse a child admission to school on the basis that the child is not toilet trained.

Definition: *Intimate care can be defined as any care which involves washing or carrying out a procedure to intimate personal areas which most people usually carry out themselves but some learners are unable to do because of their young age, physical difficulties or other special needs.*

Intimate care tasks are associated with bodily functions, body products and personal hygiene that demand direct or indirect contact with, or exposure of the genitals. Examples can include support with dressing and undressing (underwear), changing of incontinence pads and nappies, helping an individual use the toilet, or washing intimate parts of the body. Intimate care can be undertaken on a regular basis or during a one-off incident. Support may be required with catheterisation and colostomy bags. Guidance on these medical interventions should be sought from relevant Health professionals and included in the child's Individual Healthcare Plan.

Legal Context

The Welsh Government issued 'Supporting Learners with Healthcare Needs' Guidance for schools in March 2017. Many learners have a short-term healthcare need at some point, which may affect their participation in educational activities. Other learners may have significant or long-term healthcare needs affecting their cognitive or physical abilities, their behaviour or emotional state. The guidance emphasises the

need for a collaborative approach from education and health professionals, placing the learner at the centre of decision making. The guidance states that:

‘The education setting should have an intimate care policy. It should be followed, unless alternative arrangements have been agreed, and recorded in the learner’s Individual Healthcare Plan’.

The Governing Body at St Ethelwold’s VA School will act in accordance with Welsh Government Guidance ‘Supporting Learners with Healthcare Needs’ (2017) alongside ‘Keeping Learners Safe’ (2015) and the All Wales Child Protection Procedures (2008) to safeguard and promote the welfare of all learners and staff.

The Governing Body also recognises its duties and responsibilities in relation to the Equalities Act (2010) and the need to treat all learners, regardless of their age, gender, disability, religion, ethnicity or sexual orientation with respect and dignity when intimate care is given.

In order to meet their responsibilities under the Equality Act 2010, the school must make ‘reasonable adjustments’ to accommodate learners with disabilities, which may include the provision of personal and intimate care. The learner’s welfare is of paramount importance and their experience of intimate and personal care should be a positive one.

Related Policies

This Intimate Care Policy should be read in conjunction with the following school policies:

- Safeguarding & Child Protection Policy
- Health and Safety Policy – including Manual Handling
- Additional Learning Needs Policy
- Healthcare Needs Policy
- Staff Code of Conduct

Key Principles

The following are the fundamental principles upon which this Guidance is based:

- every child has the right to be safe
- every child has the right to personal privacy
- every child has the right to be valued as an individual
- every child has the right to be treated with dignity and respect
- all children have the right to be involved and consulted in their own intimate care to the best of their abilities
- all children have the right to express their views on their own intimate care and to have such views taken into account; and
- every child has the right to have levels of intimate care that are appropriate and consistent.

Roles and Responsibilities

Head teacher

Staff at St Ethelwold’s VA School that provide intimate care, are in a position of great trust and responsibility and the importance of their role in promoting personal

development of learners is invaluable. The head teacher will ensure that any adults assisting with intimate care will be employees the school and the learner will be supported to achieve the highest level of autonomy that is possible given their age and abilities.

Where intimate care is not detailed in a Job Description, then only staff members who have indicated a willingness to do so, should be required to provide intimate care. The head teacher will ensure that all staff will be appropriately trained and supported. Only those members of staff who are familiar with the Intimate Care Policy and other pastoral care policies of St Ethelwold's VA School are to be involved in the intimate care of learners.

Staff

It is the responsibility of all staff caring for a learner to ensure that they are aware of the learner's method and level of communication. Depending on their maturity and levels of stress children may communicate using different methods - words, signs, symbols, body movements, eye pointing, etc. Staff attitude to a learner's intimate care is also important. Keeping in mind the learner's age, routine care and can be both efficient and relaxed. To ensure effective communication, staff will:

- make eye contact at the child's level
- use simple language and repeat if necessary
- wait for response
- continue to explain to the child what is happening even if there is no response;
- treat the child as an individual with dignity and respect.

Staff will encourage each learner to do as much for themselves as they are able to. This may mean, for example, giving the child the responsibility for washing themselves.

Where a situation renders a learner fully dependent; the member of staff should talk about what is going to be done and provide choices where possible. The member of staff should ensure they are aware of any preferences for the intimate care from the learner and/or parent.

Young children and children with special educational needs (SEN)/ additional learning needs (ALN) can be especially vulnerable. Staff involved with their intimate care need to be particularly sensitive to their individual needs.

Some procedures must only be carried out by members of staff who have been formally trained and assessed. There should be more than one member of staff assigned within a plan to allow for any illness absence or leave.

Only in the event of an emergency would staff undertake any aspect of intimate care that has not been agreed by parents and school. Parents would then be contacted immediately.

Parents & Carers

On entry to school in Early Entitlement, Nursery or Reception, parents will need to complete a Google Form (Appendix 1) giving their consent for their child to receive intimate care. This will also outline the responsibility of parents / Carers to advise the school of any known intimate care needs relating to their child. St Ethelwold's VA

School will ensure that there is an effective transition system in place between schools / settings, and that parents are given the opportunity to discuss any intimate care needs during planned admission's meeting.

For any children with ongoing continence issues, parents will be asked to complete a Toileting Skills Checklist (Appendix 2). A Toileting Plan will also be considered at this stage, which may include timed visits to the toilet, rewards or timed and measured drinks (Appendix 3)

Parents / carer will work in partnership with school staff and other professionals to share information and provide continuity of care. Parents / Carers are required to provide changes of clothes / wipes / nappies on a daily basis.

Safeguarding

Head teacher / Designated Lead for Child Protection

It is essential that the head teacher ensures all staff are familiar with the Safeguarding & Child Protection Policy and Procedures, and if there are any concerns, they should be recorded and discussed with the school's Designated Person for Child Protection Paul Oliver and in his absence Lianne Blackburn or Rebecca Ellis.

The number of staff required to undertake procedures will depend upon individual circumstances and should be discussed with all concerned with the learner's privacy and dignity at the forefront. Knowledge of the child should be used to help assess the risk; a Risk Assessment should determine if one or two members of staff (or more) are required (see Appendix 4). Where there are concerns around child protection, previous allegations, or moving and handling issues, a minimum of two adults would be required to provide care.

Staff

If a member of staff has any concerns about physical changes in a learner's presentation, e.g. marks, bruises, soreness etc.; they will immediately report concerns to the Designated Person for Child Protection.

If a staff member has concerns about a colleague's intimate care practice he or she must report this to the Designated Person for Child Protection immediately.

If a staff member is accidentally hurt, they should report the incident to their manager immediately, seek medical assistance if needed and ensure an accurate record of what happened is recorded.

Working with a Learner of the Opposite Sex

Ideally, every child should have the choice for intimate care but the current ratio of female to male staff in many schools, means that assistance will more often be given by a female.

As stated in Supporting Learners with Healthcare Needs (2017) '*certain medical procedures may require administration by an adult of the same gender as the learner, and may need to be witnessed by a second adult. The learner's thoughts and feelings regarding the number and gender of those assisting must be considered when providing intimate care. There is no requirement in law for there to be more than one*

person assisting. This should be agreed and reflected in the IHP and risk assessment'.

Learner

If a learner becomes distressed or unhappy about being cared for by a particular member of staff, parents / carers will be contacted at the earliest opportunity in order to reach a resolution and outcomes recorded. Staffing schedules may be altered until the issue(s) are resolved. Further advice will be taken from outside agencies if necessary.

If a learner is accidentally hurt during the intimate care or misunderstands or misinterprets something, staff should reassure the learners safety and report the incident immediately to the Designated Person for Child Protection. Staff will also report and record any unusual emotional or behavioural response by the learner.

If a learner or parent / carer makes an allegation against a member of staff, the school's Designated Person for Child Protection must be informed and procedure must be followed in line with the schools Safeguarding and Child Protection Policy.

A written record of concerns must be made available to parents and kept in the learner's personal file. Further advice will be taken from outside agencies as necessary.

Vulnerability to Abuse

Disabled learners are particularly vulnerable to abuse and discrimination because:

- They often have less control over their lives than their peers
- They may have multiple carers through residential, foster or hospital placements
- Changes in appearance, mood or behaviour may be attributed to the child's disability rather than abuse.
- They may not be able to communicate what is happening to them
- They do not always receive appropriate sex and relationships education, or if they do may not understand it, so are less able to recognise abuse.

It is vitally important that all staff members are familiar with the school's Safeguarding and Child Protection Policy and Procedures. It is unrealistic to eliminate all risk, but the vulnerability places an important responsibility on staff to work in accordance with agreed procedures.

Environment

Every school should be planning to have a fully accessible changing area (detailed in the school's Accessibility Plan) if one is not already available. If St Ethelwold's VA School admits a disabled pupil with intimate care needs, we will liaise with Health Professionals and the EASG to organise timely adjustments.

St Ethelwold's VA School will identify a suitable changing area for learners with healthcare needs, to enable the privacy of learners to be maintained and to provide sufficient staff to safeguard the child.

In addition the school will also consider:

- The availability of hot and cold running water
- Nappy disposal bags (provided by the family)
- Supplies of nappies (provided by family – often from the Health Authority)
- Wipes and cleaning cloths (provided by the family)
- Labelled bins for the disposal nappies. (Soiled items should be double-bagged.)
- Special arrangements for the disposal of any contaminated or clinical materials including sharps and catheters
- Supplies of suitable cleaning materials - anti-bacterial sprays and hand wash
- Appropriate clean clothing (preferably the child's own)
- Effective staff alert system for help in an emergency
- Arrangements for menstruation when working with adolescent girls

Personal Protective Equipment (PPE)

St Ethelwold's VA School is responsible for providing Personal Protective Equipment (PPE) which should include: Nitrile disposable gloves, disposable aprons, bin and liners to dispose of waste. Staff should always wear PPE when dealing with any child who is bleeding, wet or when changing a soiled nappy / clothing. Refer to Appendix 8.

Waste Disposal

St Ethelwold's VA School is responsible for the disposal of all nappies / pads used by pupils on their premises. It would not be appropriate for the school to send used nappies / pads home at the end of the school session.

Parents / carers should provide a clean change of clothing, nappies, disposal bags, wipes etc. and parents must be made aware of this responsibility.

Disposal of soiled nappies / pads / clothing should be discussed during admission meetings and noted on the Individual Healthcare Plan / Toileting Plan. Specialist provision / equipment i.e. catheterisation / diabetes / menstrual management / or any other intimate healthcare needs should be disposed of as agreed in the learners IHP. Up to 7kg of nappies / pullups can be disposed of per school in general waste collection. Contract Waste Disposal should be considered for larger quantities.

Record Keeping

Where it is identified that intimate care will be required for a learner or group of learners (ie. Early Entitlement, Nursery and Reception pupils who may wear nappies or still have occasional accidents) an agreement between parents /carers and the school will be completed via Google Forms. This gives parental consent and details the kind of intimate care to be provided (ie. Nappy changes) It is vital that this is prepared prior to admission, and where possible opportunities are made for the pupil and family to meet the staff who will be providing intimate care.

Whole school and classroom management considerations should be taken into account, for example:

- The importance of working towards independence
- Arrangements for home/school transport, sports days, school visits, swimming etc.
- Substitutes in case of staff absence

- Strategies for dealing with bullying/harassment (if the child has an odour for example)
- Seating arrangements in class (ease of exit)
- A system to leave class with minimum disruption
- Avoiding missing the same lesson for medical routines
- Awareness of discomfort that may disrupt learning
- Implications for PE (changing, discreet clothing etc.)

For each use of intimate care, staff will record using a Personal Care Intervention Log – refer to Appendix 5.

Where there are particular issues which might indicate a need for the intimate care to be delivered by two members of staff; a risk assessment must be completed and retained on the learner's record e.g. manual handling, safeguarding issues.

Complaints Procedure

If the learner or parent is not satisfied with St Ethelwold's VA school's health care arrangements they are entitled to make a complaint. Please refer to the Complaints Policy for further information. The policy can be found on the school website.

Insurance

School staff are covered by Flintshire County Council Public Liability Insurance to provide Intimate Care.

Monitoring

Intimate Care Agreements must be reviewed on a regular basis according to the developing needs of the child.

Toileting Plans should be reviewed termly. The views of all relevant parties should be sought and considered to inform future arrangements.

This policy will be reviewed annually alongside the Healthcare Needs Policy by the head teacher, staff and governors, or if any amendments occur in legislation, or in consideration of changes in working practices.

Appendix 1

Intimate Care at St Ethelwold's

Staff at St Ethelwold's VA School that provide intimate care are in a position of great trust and responsibility and the importance of their role in promoting personal development of learners is invaluable.

The learner will be supported to achieve the highest level of autonomy that is possible given their age and abilities. The definition of Intimate care in relation to the policy is- *Intimate care can be defined as any care which involves washing or carrying out a procedure to intimate personal areas which most people usually carry out themselves but some learners are unable to do because of their young age, physical difficulties or other special needs.*

The headteacher will ensure that staff have appropriate training and support. The intimate care policy and other pastoral care policies will be made available to all members of staff who may be involved in the intimate care of learners which may include the following:

- changing of nappies
- Changing of clothes following a toileting accident or sickness
- changing of other continence wear

semail@hwbcymru.net [Switch accounts](#)



* Indicates required question

Email *

Your email address

Child's Full Name *

Your answer

Child's Date of Birth *

Date

dd/mm/yyyy



Parent/Carer's name *

Your answer

I give permission to provide intimate care to my child *

☐ Yes

☐ No

I will advise the school of anything that may affect issues of personal care (if medication has changed, if toilet training has commenced at home or if my child has a newly diagnosed or suspected medical condition for example) *

☐ I agree

I agree to send in nappies (if used), wipes, nappy bags and spare clothes in case my child requires a change in school *

☐ I agree

I understand the procedures that will be carried out and will contact the school immediately if there are concerns. *

☐ I agree

Please use this space to provide any additional information if needed.

Your answer

Submit

Clear form

Never submit passwords through Google Forms.

This form was created inside Hwb. [Report Abuse](#)



Appendix 2

Toileting Skills Checklist

Please state if child is wearing nappies or pull-ups:			
	Skills	Achieved	Partly Achieved
1.	Awareness of toileting needs?		
2.	Has periods of being dry?		
3.	Some regularity in wetting / soiling?		
4.	Pauses while wetting / soiling?		
5.	Shows some indication of awareness of soiling?		
6.	Shows some indication of awareness of wetting?		
7.	Understands signs / words given for communicating toileting needs e.g. toilet, potty, wet, dry, wee, poo etc.?		
8.	Can express some appropriate signs / words to communicate toileting needs?		
9.	Needs physical aids / support to access the toilet area?		
10.	Can access the toilet area with prompts?		
11.	Can access the toilet area independently?		
12.	Feels comfortable and relaxed in the toilet area?		
13.	Needs physical assistance to follow toilet routines e.g. lining up to go there, hand washing etc?		
14.	Needs some prompting to follow toilet routines?		
15.	Follows some toilet routines independently?		
16.	Will fetch and pass required changing items e.g. nappy, wipes etc?		
17.	Cooperates with having clothes removed / pulled down by appointed adult, for changing purposes?		
18.	Cooperates with having nappy changed?		
19.	Cooperates with cleaning up procedures?		
20.	Will sit on the potty with nappy on, with physical support?		
21.	Will sit on the potty with nappy on, unaided?		
22.	Will sit on the potty with nappy off, with physical support?		
23.	Will sit on the potty with nappy off, unaided?		
24.	Needs physical aids / special supports to enable sitting on the toilet?		
25.	Will sit on the toilet with nappy on, with physical support?		
26.	Will sit on the toilet with nappy on, unaided?		
27.	Will sit on the toilet with nappy off, with physical support?		
28.	Will sit on the toilet with nappy off, unaided?		
29.	Has passed urine into potty?		
30.	Has had bowel movement on potty?		
31.	Has passed urine on toilet?		
32.	Has had bowel movement on toilet?		

33.	Can independently complete <u>pulling down trousers</u> from:	Achieved	Partly Achieved
	• Calves		
	• Knees		
	• Thighs		
	• Hips		
	• Waist		
34. 3 4	Can independently complete <u>pulling down underwear</u> from:	Achieved	Partly Achieved
	• Calves		
	• Knees		
	• Thighs		
	• Hips		
	• Waist		
35	Girls: Can lift skirt and pull down all necessary clothing independently		

Appendix 3

Toileting Plan

Child's Name		DOB	
Health Visitor / School Nurse		Date Agreed	
		Details	Action
1. Working Towards Independence: e.g. taking learner to toilet at timed intervals, using sign or symbols, any rewards used			
2. Arrangements for changing of nappy / pad / clothing: e.g. who, where, when, arrangements for privacy			
3. Staffing Requirements: e.g. how many, who, (there should be more than one named person)			
4. Level of Assistance Needed: e.g. undressing, dressing, hand washing, talking/signing to learner			
5. Infection Control: e.g. wearing disposable gloves, arrangements for nappy/pad disposal			
6. Resources Needed: e.g. special seat, nappies/pull ups/pads, creams, disposable sacks, change of clothes, toilet step etc			
7. Sharing Information: e.g. if learner has nappy rash or any marks, cultural or family customs, birthmarks etc			
8. Cleaning e.g. on rare occasions the use of shower facilities may be required / procedure for this scenario to be confirmed			

Parent/carer name (print)		Name of School Staff member (print)	
Signature		Signature	
Review Date			
Outcome of Review			

Appendix 4

Toileting Risk Assessment Template

Pupil Name:			
Pupil Date of Birth			
Date of Risk Assessment			
	Yes	No	Notes
Does the pupil's weight / size / shape present a risk?			
Does communication present a risk?			
Does comprehension present a risk?			
Is there a history of child protection concerns?			
Are there any medical considerations (including pain and discomfort)?			
Does moving and handling present a risk?			
Does behaviour present a risk?			
Is staff capability a risk (back injury/pregnancy)?			
Are there any risks concerning pupil capacity? <ul style="list-style-type: none">• General Fragility• Fragile Bones• Epilepsy• Head control• Other			
Are there any environmental concerns?			
If 'yes' to any of the above please complete a Personal Care Plan			
Signed by:			
Lead Teacher Signature:			

Appendix 5

[illegible]

Version	From	To
1	March 2024	May 2025
2	May 2025	