

Intimate Care Policy

St Matthew's Primary School



Approved by: St Matthew's Governing Body

Date: 13.02.2025

Last reviewed on: 13.02.2025

Next review due by: February 2025

Introduction

St Matthew's primary School is committed to ensuring that all staff responsible for the intimate care of children or young people will undertake their duties in a professional manner at all times. We recognize that there is a need to treat all children/young people with respect when intimate care is given. No child/young person should be attended to in a way that causes distress, embarrassment or pain.

What is Intimate Care?

Intimate care is any personal care that most people usually carry out for themselves.

Our Approach to Best Practice

The management of all children/young people with intimate care needs will be carefully planned and should be a positive experience for all involved. The child/young person who requires intimate care is treated with respect at all times; the child's welfare and dignity are of paramount importance.

Staff who provide this care are trained to do so (including Safeguarding and Child Protection and Moving and Handling Training) and are fully aware of best practice, including having read the Guidance for Safer Working Practice for Adults who Work with Children and Young People in Education Settings (2022). Suitable equipment and facilities can be identified to assist with children/young people who need special arrangements by an assessment from an Occupational Therapist. (OT)

It is the school/setting's responsibility to support staff that are carrying out intimate care procedures. Advice can be given by contacting the occupational therapy service, school nurse or the Education Safeguarding Team as required. Whenever possible staff who are involved in the intimate care of children/young people will not usually be involved with the delivery of relationships and sex education to the children/young people in their care as an additional safeguard to both staff and children involved. If staff are involved, care should be taken to ensure that resource materials cannot be misinterpreted and clearly relate to the learning outcomes identified by the lesson plan. This plan should highlight particular areas of risk and sensitivity.

Children/young people will be supported to achieve the highest level of autonomy possible given their age and abilities. Staff will ensure each child/young person does as much for him/herself as he/she can. This may mean, for example, giving the child responsibility for washing themselves. Individual intimate care plans will be drawn up as appropriate and shared and agreed by the child/young person and their parents/carers.

Each child/young person's right to privacy will be respected. Careful consideration will be given to each situation to determine how many staff need to be present when the child/young person is being cared for. Where possible one child will be catered for by one adult unless there is a sound reason for having more adults present. In this case, the reasons should be clearly documented and reassessed regularly. Wherever reasonable and practical staff should only care intimately for an individual of the same sex. However, in certain circumstances this principle may need to be waived where failure to provide appropriate care would result in negligence, for example female staff supporting boys when there are no male staff.

Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the care plan. The needs and wishes of children/young people and parents will be taken into account wherever possible within the constraints of staffing and equal opportunities legislation.

Safeguarding Children

Cambridgeshire and Peterborough Safeguarding Children Partnership Board Interagency Procedures will be adhered to alongside the school/setting's safeguarding and child protection policy and procedures.

All children/young people will be taught personal safety skills as part of Personal Social and Health Education (PSHE) relative to their age, ability and understanding. Research indicates that children with an awareness of personal safety and the ability to be assertive are more resilient to abuse. These skills will be shared with parents/carers to enable them to be consolidated within the home/community.

If a member of staff has any concerns about physical or behavioral changes in a child/young person's presentation, e.g. marks, bruises, soreness or reluctance to go to certain places/people etc. s/he will immediately pass their concerns to the Designated Safeguarding Lead in their school/setting.

If a child/young person is displaying inappropriate sexual behavior/language, advice should be sought from the appropriate source (e.g. in schools this might be: Designated Safeguarding Lead, School Nurse, Social Care, Education Safeguarding Team, Cambridgeshire Sexual Behaviour Service)

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/carers will be contacted at the earliest opportunity as part of this process in order to reach a resolution. Staffing schedules will be altered until the issue/s are resolved so that the child/young person's needs remain paramount. Further advice, following the Interagency Procedures will be taken from outside agencies as necessary.

If a child makes an allegation against a member of staff the procedures for Allegations Against Staff will be followed as outlined in the school's Safeguarding and Child Protection policy. All staff involved in intimate care are required to have read the School's Policy and Guidance for Intimate Care and the Guidance for Safer Working Practice as previously mentioned. Be aware of the need to refer to other policies the school/setting may have in place for clarification of practices and procedures.

Intimate Care Plan

Child/Young Person:			School/Setting:	
DOB:		Male/Female	Date:	

Description of Intimate Care Needs

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Task: If practical, it may be possible to identify one part of the intimate care procedure which gives the child/young person an opportunity to have a little more independence. If so, the plan can then assist in the development of this part of the whole task.

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Action Plan – Describe the steps needed to achieve this task

1.
2.
3.
4.

The following people will be assisting in the above activities:

Named Person:
.....
.....

Additional people who may be involved to cover when the named people are absent:

.....
.....

I am in agreement with the above procedures being undertaken: (Please sign as appropriate)

Person for whom the plan is

Parent/Carer

SENDSCO/Inclusion officer

Teaching Assistant(s) Teaching Assistant (s)

Date Date for review

