



Intimate Care Policy

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Introduction

Kingsbury School takes seriously its responsibility to safeguard and promote the welfare of the pupils in its care. The Governing body recognises its duties and responsibilities in relation to the Equality Act, which requires that any child with an impairment that effects his/her ability to carry out normal day-to-day activities must not be discriminated against. It is committed to ensuring that all staff responsible for the intimate care of pupils will always undertake their duties in a professional manner. It is acknowledged that these adults are in a position of great trust. Kingsbury School recognises that there is a need to treat all pupils, whatever their age, gender, disability, religion, or ethnicity, with respect. The pupil’s welfare and dignity is of paramount importance and they will be provided with a high level of privacy, choice and control. Pupils with additional needs can be especially vulnerable and staff involved with their intimate care need to be sensitive to their individual needs.





Definition of Intimate Care

'Care tasks of an intimate nature, associated with bodily functions, bodily products and personal hygiene, which demands direct or indirect contact with, or exposure of, the intimate parts of the body'

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 pupils are unable to do because of their very young age, physical difficulties or other special needs.

Intimate care can include:

- Oral care
- Washing of intimate body parts
- Toileting/changing
- Menstrual care
- Supervision of children in intimate self-care
- Catheter, stoma care
- Applying/renewing dressings/creams to intimate parts of the body

'Although it may involve touching another person, it is less intimate and usually has the function of helping with personal presentation'

Personal care tasks specifically identified as relevant include:

- Feeding
- Oral care
- Administering oral medication
- Hair care
- Dressing and undressing (clothing)
- Washing non-intimate body parts
- Prompting to go to the toilet.





Principles of Intimate Care

The following are the fundamental principles upon which this policy 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
- Every child has the right to be involved and consulted in their own intimate care to the best of their abilities
- Every child has the right to express their views on their own intimate care and to have such views considered
- Every child has the right to have levels of intimate care that are as consistent as possible

Safeguarding

All children have the right to be safe and to be treated with dignity and respect. Children with disabilities can be especially vulnerable. Staff involved with their intimate care need to be sensitive to their individual needs. Staff also need to be aware that some adults may use intimate care as an opportunity to abuse children. It is important to bear in mind that some care tasks/treatments can be open to misinterpretation. Adhering to the setting policy and procedure should safeguard children and practitioners.

Health and Safety

Procedures are in place for dealing with spillages of bodily fluids such as when a child accidentally wets or soils themselves or is sick while on the premises. The same precautions apply for nappy/pull ups/pads/changing.

This should include

- Staff to wear disposable aprons and gloves while changing a child.
- Soiled nappies/pull-ups/pads disposed of appropriately.
- Both staff and pupil to wash hands using hot water and soap as soon as possible after changing is complete.





- Both staff and pupils to dry hands using paper towels.
- Changing area/toilet to be left clean and tidy.
- **Using reusable nappies.** Wet and soiled nappies are to be put in nappy sacks and placed in the nappy lock bin with the child's name on. These are then to be put into a zip-up wet bag provided by parents to be sent home at the end of each day. Each child using reusable nappies must be provided with their own bin, clearly labelled. This is to be washed with disinfectant at the end of each day.

Staff involved in intimate care

Wherever possible one pupil will be cared for by one adult unless there is an established reason for having two adults present. Wherever possible there will be a rota of staff known to the pupil 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 staff.

Some pupils may, for reasons of dignity, prefer the person delivering their care to be of the same sex and wherever possible these requests will be accommodated.

Both male and female staff can carry out intimate care routines with male and female pupils. However, as an additional dignity measure, post-pubescent girls will not be routinely cared for by male members of staff. The exception to this would be in an emergency situation when male staff could be asked to assist with a female pupil whatever their age. Wherever possible, in circumstances of mixed gender intimate care, two members of staff will be present.

The religious views and cultural values of families should be considered, particularly as they might affect certain practices or determine the gender of the staff

Procedures

All pupils who require intimate care are treated respectfully at all times; the pupil's welfare and dignity is of paramount importance. Staff will work in close partnership with parents and carers to share information and provide continuity of care. Staff who provide intimate care are trained to do so (including Safeguarding Children and child protection, Safer Moving and





Handling, Intimate care procedures, Supporting Pupils with Medical Conditions in School) and are fully aware of best practice.

Staff are aware of best practice regarding infection control, including the need to wear disposable gloves and aprons and to deal with the cleaning up of bodily fluids in the correct manner.

Staff will be supported to adapt their practice in relation to the needs of individual pupils considering development changes such as the onset of puberty and menstruation.

There is careful communication with each pupil in line with their preferred means of communication (verbal, signing, symbolic, etc.) to discuss the pupil's needs and preferences.

Pupils will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each pupil to be as independent as possible, for some pupils this may mean they complete most of the procedure for themselves for others they may be involved in a very small part.

Each pupil's right to privacy will be respected. Consideration will be given to each pupil's situation to determine how many staff might need to be present when a pupil needs help with intimate care.

Practice in intimate care must be consistent. Effective communication is essential to promote independence, awareness of procedures and control for the pupil.

All staff should be aware of the school's confidentiality policy. Sensitive information will be shared on a need-to-know basis.

All staff involved in the delivery of intimate care must be vigilant in their observations about physical changes in a pupil's presentation and report any concerns to the designated person.

Where an established procedure is not in place and a child has need of help with intimate care e.g in the case of an 'accident' which has needed to be attended to then parents/carers will be informed the same day via Edulink or a phone call.

