



**South
Pennine
Academies**

An excellent education for everyone

Intimate Care Model Policy

Policy Owner	Inclusion Director
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1. Statement of intent

Our academy takes the health and wellbeing of its students very seriously. As described in this policy, the academy aims to support students with physical disabilities and illnesses to enable them to have a full and rich academic life whilst at school.

The trust recognises its duties and responsibilities in relation to the Equality Act 2010, which states that any student with an impairment affecting his/her ability to carry out normal day-to-day activities must not be discriminated against.

Students will always be treated with care and respect when intimate care is given, and no student will be left feeling embarrassed, distressed or in pain.

2. Legal framework

This policy has due regard to relevant legislation and guidance, including, but not limited to, the following:

- Keeping Children Safe in Education
- The Children and Families Act 2014
- The Education Act 2011
- The Health Act 2006
- The Equality Act 2010

This policy will be implemented in conjunction with the academies':

- Health and Safety Policy
- Supporting Students with Medical Conditions Policy
- First Aid Policy
- Child Protection and Safeguarding Policy
- Staff Code of Conduct
- Whistleblowing Policy
- Administering Medications Policy

3. Definitions

For the purpose of this policy, intimate care is defined as any care which may involve the following:

- Washing
- Touching
- Carrying out an invasive procedure
- Changing a child who has soiled themselves
- Providing oral care
- Feeding
- Assisting in toilet issues

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 of intimate care include support with dressing and undressing (underwear), changing incontinence pads, nappies or medical bags such as colostomy bags, menstrual hygiene, helping someone use the toilet, or washing intimate parts of the body.

Students may be unable to meet their own care needs for a variety of reasons and will require regular support.

4. Health & safety

Any member of staff that is required to assist a student with changing a medical bag will be trained to do so and will carry out the procedure in accordance with the Supporting Students with Medical Conditions Policy.

Staff will wear disposable aprons and gloves while assisting a student in the toilet or while changing a nappy, incontinence pad or medical bag.

Soiled nappies, incontinence pads and medical bags will be securely wrapped and disposed of appropriately.

Where one student requires intimate care/toileting, nappies, incontinence pads and medical bags will be disposed of in an ordinary bin, as per health and safety guidelines.

Where more than one student requires intimate care, nappies, incontinence pads and medical bags will be disposed as follows:

The changing area or toilet will be left clean.

Hot water and soap are available to wash hands.

Paper towels are available to dry hands.

5. Staff & facilities

Staff members who provide intimate care are trained to do so and are fully aware of best practice. Suitable equipment and facilities will be provided to assist students who need special arrangements following assessment from a physiotherapist or occupational therapist. This may include the following:

- Adjustable bed
- Changing mat
- Non-slip step
- Cupboard
- Adapted toilet seat or commode seat
- Hoist
- Swivel mat
- Disposable gloves/aprons
- Nappies, pads and medical bags
- Tissue rolls (for changing mat/cleansing)
- Supply of hot water
- Soap
- Barrier creams
- Antiseptic cleanser for staff
- Antiseptic cleanser for the changing bed/mat
- Clinical waste bag
- Spillage kit

Mobile students will be changed while standing up.

Students who are not mobile will be changed on a purpose-built changing bed or changing mat on the floor.

Staff will be supported to adapt their practice in relation to the needs of individual students taking into account developmental changes such as the onset of puberty or menstruation.

We recognise that intimate care best practice is with familiar adults.

6. Academy responsibilities

Where appropriate arrangements will be made to hold a multi-agency meeting to discuss the personal care needs of any student prior to attendance at the academy.

Students who require intimate care will be involved in planning their own healthcare needs wherever possible.

In liaison with the student and parents/carers, an individual intimate care plan will be created to ensure that reasonable adjustments are made for any student with a health condition or disability. The child 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 they can.

Regular consultations will be arranged with all parents/carers and students, and this will be recorded on the child's care plan.

The privacy and dignity of any student who requires intimate care will always be respected.

A qualified member of staff will change the student or assist them in changing themselves if they become wet, or soil themselves.

Any student with wet or soiled clothing will be assisted in cleaning themselves and will be given spare clothing, nappies, pads, etc., as provided by the parents/carers.

Members of staff will react to accidents in a calm and sympathetic manner.

Accurate records of times, staff, and any other details of incidents of intimate care will be kept.

Arrangements will be made for how often the student should be routinely changed if the student is in school for a full day and will be changed by a designated members of staff.

A minimum number of changes will be agreed.

The family's cultural practices will always be considered for cases of intimate care.

Parents/carers will be contacted if the student refuses to be changed or becomes distressed during the process.

Excellent standards of hygiene will be maintained at all times when carrying out intimate care.

7. Parental responsibilities

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

Parents/carers 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/carers to ensure that they understand the policies and procedures surrounding intimate care.

Parents/carers will inform the academy should their child have any marks/rashes.

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

8. Safeguarding

Intimate care is a regulated activity therefore, only members of staff who have an enhanced DBS certificate with a barred list check are permitted to undertake intimate care duties.

Wherever possible, staff involved in intimate care will not be involved in the delivery of sex education to the students in their care as an extra safeguard to both staff and students involved.

Individual intimate care plans will be drawn up for students as appropriate to suit the circumstances of the student.

Each student's right to privacy will be respected. Careful consideration will be given to each student's situation to determine how many carers will need to be present when the student requires intimate care.

If any member of staff has concerns about physical changes to a student's presentation, such as marks or bruises, they will report the concerns to the Designated Safeguarding Lead immediately.

If a child becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be looked into, and the outcome recorded. Parents/carers will be contacted at the earliest opportunity as part of this process in order to reach a resolution.

9. Swimming

Students in years 3 and 4 regularly participate in swimming lessons on site and during these lessons, students are entitled to privacy when changing; however, some students will need to be supervised during changing.

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

Special consideration will be taken to ensure that cases of bullying or teasing do not occur.

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

10. Offsite visits

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

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

Meetings with students away from the academy premises, where a chaperone is not present, will not be permitted, unless approval has been obtained by the principal.

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

11. Appendices

11.1 Record of intimate care intervention

Student's name:	Class/year group:
Name of support staff:	
Date:	Review date:

Date	Time	Procedure	Staff signature	Second signature

11.2 Toilet management plan

Student's name:	Class/year group:
Name of personal assistant:	
Date:	Review date:
Area of need	

Equipment required	
Locations of suitable toilet facilities	
Support required	Frequency of support

Working towards independence:

Student will try to	Personal assistant will	Parents/carers will	Target achieved date

Signed_____ Parent/carer

Signed_____ Personal assistant

Signed_____ Second member of staff

Signed_____ Student (where appropriate)

11.3 Agreement between student & personal assistant

Student's name:

Class/year group:

Name of support staff involved:

Date:

Review date:

Support staff

As the personal assistant helping you with intimate care, you can expect me to do the following:

- When I am the identified person, I will stop what I am doing to help you. I will avoid all unnecessary delays.
- When you use our agreed emergency signal, I will stop what I am doing and come and help.
- I will treat you with respect and always ensure privacy and dignity.
- I will ask permission before touching you or your clothing.
- I will check that you are as comfortable as possible, both physically and emotionally.
- If I am working with a colleague to help you, I will ensure that we talk in a way that does not embarrass you.
- I will listen carefully if there is something you would like to change about your Intimate Care Plan.

Student

As the student who requires help with intimate care, you can expect me to do the following:

- I will try, whenever possible, to let you know a few minutes in advance that I am going to need help with intimate care, so that you can make yourself available and be prepared to help me.
- I will try to use the toilet at break time, or at the agreed times.
- I will only use the agreed emergency signal for real emergencies.
- I will tell you if I want you to stay in the room or stay with me in the toilet.
- I will tell you straight away if you are doing anything that makes me feel uncomfortable or embarrassed.
- I may talk to other trusted people about how you help me. They too will let you know what I would like to change.

Signed: _____ Personal assistant

Signed: _____ Student

11.4 Toilet training procedures

As children develop bladder control, they will pass through the following three stages:

- The child becomes aware of having wet and/or soiled pants
- The child knows that urination/defecation is taking place and is able to alert a member of staff
- The child realises that they need to urinate/defecate and alerts a member of staff in advance

During these stages, members of staff will assess the child over a period to determine:

- If there is a pattern to when the child is soiled/wet.
- The indicators that the child displays when they need the toilet, e.g., facial expressions.

Staff will implement the following strategies to get children used to using the toilet and being independent:

- Familiarise the child with the toilet, washing their hands, flushing the toilet and reference other children as good role-models for this practice
- Encourage the child to use the toilet when they are using their personal indicators to show that they may need the toilet
- Take the child to the toilet at a time when monitoring has indicated that this is when they would usually need the toilet
- Ensure that the child is able to reach the toilet and is comfortable doing so
- Stay with the child and talk to them to make them more relaxed about using the toilet
- Don't force the child to use the toilet if they don't want to, but still encourage them to do so using positive language and praise
- Deal with any accidents discreetly, sensitively and without any unnecessary attention
- Be patient with children when they are using the toilet, and use positive language and praise to encourage them