



Intimate Care Policy (LLT)



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ENGAGE, ENABLE,
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All students at Lydiate Learning Trust have the right to be safe and be treated with dignity, respect and privacy at all times so as to enable them to access all aspects of school. This policy sets out clear principles and guidelines on supporting intimate care with specific reference to toileting. It should be considered in line with the Child Protection and Safeguarding, Health and Safety, LLT SEND and accessibility policies This policy supports the safeguarding and welfare requirements of the Disability Discrimination Act 2005.

1. Aims

This policy aims to ensure that:

- Intimate care is carried out properly by staff, in line with any agreed plans
- The dignity, rights and wellbeing of children are safeguarded
- Students with intimate care difficulties are not discriminated against, in line with the Equalities Act 2010
- No student's physical, mental or sensory impairment will have an adverse effect on their ability to take part in day to day activities
- Parents are assured that staff are knowledgeable about intimate care and that the needs of their children are taken into account
- Staff carrying out intimate care work do so within guidelines (i.e. health and safety, manual handling, safeguarding protocols awareness) that protect themselves and the students involved

2. Legislation and Statutory Guidance

This policy complies with [statutory safeguarding guidance](#).

It also complies with our funding agreement and articles of association.

3. Intimate Care Tasks

Intimate care can be defined as an activity which meets the personal needs of a student and covers any tasks that involve dressing and undressing, washing - including intimate parts, helping someone use the toilet, changing nappies/continence pads or carrying out a procedure that requires direct or indirect contact to an intimate personal area. Other acceptable physical contact may include: co-active feeding, wiping or cleaning a student when they have finished or during a meal, moving a student's head to gain eye contact, or to ensure that the student is in the best position to see/hear, wiping noses, wiping dribbling mouths, washing hands and faces, applying sun-tan lotion, strapping students into hoists and other acceptable constraints and giving a small hug to comfort and provide reassurance when the student is feeling distress.

4. Role of parents

Where there isn't an intimate care plan or parental consent for routine care in place, parental permission will be sought before performing any intimate care procedure.

If the school is unable to get in touch with parents and an intimate care procedure urgently needs to be carried out, the procedure will be carried out to ensure the child is comfortable, and the school will inform parents afterwards.

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4.1 Creating an intimate care plan

Where an intimate care plan is required, it will be agreed in discussion between the school, parents, the child (when possible) and any relevant health professionals.

The school will work with parents and take their preferences on board to make the process of intimate care as comfortable as possible, dealing with needs sensitively and appropriately.

Subject to their age and understanding, the preferences of the child will also be taken into account. If there's doubt whether the child is able to make an informed choice, their parents will be consulted.

Every child's/young person's right to privacy will be respected. Careful consideration will be given to each child's/young person's situation to determine how many carers may be needed when a child/young person is toileted.

The plan will be reviewed twice a year, even if no changes are necessary, and updated regularly, as well as whenever there are changes to a student's needs.

See **appendix 1** for a blank template plan to see what this will cover.

4.2 Sharing Information

The school will share information with parents as needed to ensure a consistent approach. It will expect parents to also share relevant information regarding any intimate matters as needed.

5. Role of staff

5.1 Which staff will be responsible

- Any roles who may carry out intimate care will have this set out in their job description.
- No other staff members can be required to provide intimate care.
- All staff at the school who carry out intimate care will have been subject to an enhanced Disclosure and Barring Service (DBS) with a barred list check before appointment, as well as other checks on their employment history.
- Staff will be supported to adapt their practice in relation to the needs of an individual child/young person taking into account developmental changes such as the onset of puberty.
- Wherever possible staff who are involved in the intimate care of children/young people will not usually be involved in the teaching of sex education to the children/young people in their care as an additional safeguard to both staff and children/young people involved.
- Wherever possible, staff should only care intimately for an individual of the same sex. However, in some circumstances this may be waived where there has been clear agreement between the child/young person and their parents/carers (For example when a member of staff has been working with the same young person for a number of years – primary schools into secondary schools). This principle may also be waived where failure to provide appropriate care would result in possible negligence for example.

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- Intimate care arrangements will be discussed with parents/carers and appropriate professionals and recorded on the child's care plan.

5.2 How staff will be trained

Staff will receive:

- Training in the specific types of intimate care they undertake
- Regular safeguarding training
- If necessary, manual handling training that enables them to remain safe and for the student to have as much participation as is possible

They will be familiar with:

- The control measures set out in risk assessments carried out by the school
- Hygiene and health and safety procedures, including those related to COVID-19

They will also be encouraged to seek further advice as needed.

6. Intimate Care Procedures

6.1 How procedures will happen

Where possible, one child will be catered for by the one adult unless there is a sound reason for more adults to be present. If this is the case, the reasons should be included in the intimate care policy.

Every child's right to privacy will be respected. Careful consideration will be given to each child's situation to determine how many carers may be needed when a child is toileted.

The child's dignity must always be considered at all times and where contact of a more intimate nature is required, another member of staff should be in the vicinity and should be made aware of the task being undertaken.

The child will be supported to achieve the highest level of autonomy that is possible given their age and ability. Staff will encourage each child to do as much for themselves as they can.

The place where care is to take place will be recorded on each individual intimate care plan.

Procedures will be carried out in a COVID-safe way according to the school's risk assessment and COVID-19 protocol.

When carrying out procedures, the school will provide staff with:

- Gloves
- Aprons
- Sealed bags to dispose of any waste
- Specific bin designated for the disposal of such waste

This waste must be disposed of in a sealed bag, stored in a bin which is specifically designated for the disposal of such waste. Disposal must follow the guidelines in respect of health and safety

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For students needing routine intimate care, the school expects parents to provide, when necessary, a good stock (at least a week's worth in advance) of necessary resources, such as nappies, underwear and/or a spare set of clothing.

Any soiled clothing will be contained securely, clearly labelled, and discreetly returned to parents at the end of the day.

If a child, becomes unhappy about being cared for by a particular member of staff, the matter will be looked into and the findings/outcomes recorded. Parents/carers will be contacted at the earliest opportunity as part of this process in order to reach a resolution. Advice from outside agencies will be taken if necessary.

6.2 Concerns about Safeguarding

If a member of staff carrying out intimate care has concerns about physical changes in a child's appearance (e.g. marks, bruises, soreness), they will report this immediately to the Designated Safeguarding Lead or Deputy.

If a child is hurt accidentally or there is an issue when carrying out the procedure, the staff member will report the incident immediately to the Designated Safeguarding Lead.

If a child makes an allegation against a member of staff, the responsibility for intimate care of that child will be given to another member of staff as quickly as possible and the allegation will be investigated according to the school's safeguarding procedures.

Any act, intervention or incident that is contrary to the norm should be recorded and reported. Parents/carers must be advised if the incident or intervention may have any bearing on the child's safety or well-being. The outcomes of any such conversation should also be logged.

7. Monitoring Arrangements

This policy will be reviewed by the Executive Director for Safeguarding annually. If the need arises, such as legislative changes or as a result of a specific incident, the policy will be reviewed and, if needed, amended at that time.

The policy will be approved by the Trust Board.

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Appendix 1

LLT Intimate care plan

This plan is for pupils who need regular support with toileting, washing and/or changing.

PARENTS/CARERS	
Name of child	
Type of intimate care needed	
How often care will be given	
What training staff will be given	
Where care will take place	
What resources and equipment will be used, and who will provide them	
How procedures will differ if taking place on a trip or outing	
Name of senior member of staff responsible for making sure care is carried out according to the intimate care plan	
Name of parent or carer	
Relationship to child	
Signature of parent or carer	
Date	
CHILD	
How many members of staff would you like to help?	
Do you mind having a chat when you are being changed or washed?	
Signature of child	
Date	

This plan will be reviewed twice a year.

Next review date:

To be reviewed by

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