

PIERVIEW ACADEMY

INTIMATE CARE POLICY

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1) Principles

1.1 The Executive Board acts in accordance with all current Government regulations and guidance for Safeguarding Children to protect and promote the welfare of pupils at Pierview Academy. All staff responsible for the intimate care of pupils will do so in a professional, dignified, and respectful manner at all times.

1.2 The Executive Board recognises its statutory duties under the Equality Act 2010. Any pupil with an impairment or disability that affects their ability to carry out day-to-day activities will not be discriminated against.

1.3 Staff work in close partnership with parents/carers and multi-agency professionals to ensure continuity of care. Staff delivering intimate care receive appropriate training and support tailored to individual pupil needs.

1.4 Meeting a pupil's intimate care needs is an essential component of safeguarding. This policy must be read in conjunction with the school's related policies:

- Safeguarding and Child Protection Policy
- Staff Code of Conduct and Safer Working Practice Guidance
- Whistleblowing Policy
- Health and Safety Policy
- Special Educational Needs (SEN) Policy
- First Aid and Administration of Medicines Policy
- Supporting Pupils with Medical Conditions Policy

1.5 All pupils—regardless of age, disability, gender, gender identity, race, religion, or sexual orientation—will be treated with equal dignity and respect during intimate care. The child's welfare is paramount; care must be delivered gently, sensitively, and without causing distress or pain.

1.6 Where a pupil has an Individual Healthcare Plan (IHP) or Education, Health and Care Plan (EHCP), intimate care procedures must align with the principles set out in this policy.

2) The Child's Rights

The following fundamental principles underpin all intimate care practices at Pierview Academy:

- Every child has the right to be safe.
- Every child has the right to personal privacy and modesty.
- Every child has the right to be valued as an individual and treated with dignity.
- Every child has the right to be involved and consulted regarding their intimate care to the extent of their age and understanding.

- Every child has the right to express their views and have those views respected.
- Every child has the right to consistent, high-quality care.

3) Definition of Intimate Care

3.1 Intimate care is defined as any assistance or procedure involving washing, touching, or carrying out care to intimate personal areas that individuals typically perform for themselves, but which a pupil requires help with due to age, physical impairment, learning difficulty, or special educational needs. This includes care related to continence, menstrual management, washing, toileting, and dressing.

3.2 Intimate care also encompasses the close supervision of pupils engaged in intimate self-care.

4) Best Practice for Staff

Care Plans & Consent

4.1 Pupils requiring regular intimate care must have a written Intimate Care Plan, Healthcare Plan, or Individual Education Plan (IEP). The plan must be agreed upon by staff, parents/carers, the pupil (where appropriate), and relevant health professionals (e.g., school nurses, physiotherapists). Plans are reviewed at least annually, or sooner if care needs change.

4.2 Written parental consent must be obtained prior to delivering planned or routine intimate care using the standard Intimate Care Consent Form.

4.3 Where an Intimate Care Plan is **not** in place and a pupil requires emergency or occasional assistance (e.g., an unexpected accident), parents/carers will be informed on the same day. Notification must be delivered confidentially (via phone or sealed letter, not through general home-school diaries).

4.4 Appropriate terminology for private body parts and bodily functions should be agreed upon between staff, parents/carers, and the pupil, and documented in the care plan.

Communication & Pupil Voice

4.5 Staff will use the pupil's preferred mode of communication (verbal, sign, visual symbols) to explain procedures before commencing care. Pupil consent must be sought prior to starting any procedure.

4.6 Staff will encourage pupils to perform as much self-care as independently possible.

4.7 If a pupil expresses distress or explicitly refuses intimate care, staff must stop the procedure immediately, reassure the child, inform the Headteacher and parents/carers, and document the incident.

Staffing, Training & Safeguarding Requirements

4.8 Intimate care will only be provided by employed school staff who have completed full safer recruitment checks, including an Enhanced DBS check with Children's Barred List check. Volunteers and student placements are strictly prohibited from carrying out intimate care.

4.9 Staff providing intimate care must undergo role-specific training, including manual handling, infection control, and safeguarding procedures. Refresher training is required annually.

4.10 To preserve pupil privacy and dignity, the number of staff members present during intimate care should be kept to the minimum necessary for safe delivery. However, where hoisting, complex physical handling, or heightened risk management is required, a second trained adult must be present.

4.11 Staff must inform another colleague when they are stepping away to assist a pupil with intimate care.

4.12 Mobile phones, cameras, smartwatches, or recording devices are strictly prohibited in intimate care areas or during the provision of intimate care.

4.13 Staff will respect religious, cultural, and gender considerations when planning care, accommodating preferences for the gender of the carer wherever reasonably practicable.

Health, Safety & Medical Procedures

4.14 Invasive medical procedures (e.g., catheterisation, stoma care, PEG feeding) require a dedicated Medical Intimate Care Plan. Staff administering these procedures must receive specialized clinical training and verification of competence from a healthcare professional.

4.15 Detailed records must be kept for every intimate care interaction (planned or unplanned) and signed by attending staff. Logs must include:

- Date and exact times
- Names of staff present
- Care provided
- Observations on the pupil's physical condition, demeanor, or behaviour

4.16 Clinical and hygiene waste (e.g., pads, gloves, soiled items) must be disposed of following statutory infection control and environmental protocols.

Facilities, Single-Sex Spaces & Hygiene

4.17 The school provides designated, hygienic intimate care facilities, including an accessible WC and changing area to maintain pupil privacy and dignity.

4.18 Toilet, changing, and shower facilities comply with statutory regulations regarding single-sex spaces. Where single-occupancy accessible facilities are used for intimate care, they are maintained strictly for individual use to protect pupil dignity and privacy.

4.19 Staff must adhere to infection control standards at all times: wearing disposable gloves and aprons, cleaning and sanitising surfaces between uses, and practicing effective hand hygiene before and after procedures.

5) Safeguarding & Child Protection

5.1 Staff must strictly adhere to current statutory safeguarding guidance when delivering intimate care, including:

- **Keeping Children Safe in Education (KCSIE)**
- **Working Together to Safeguard Children**

5.2 All staff employed at Pierview Academy are required to read and understand **Part One** of *Keeping Children Safe in Education* in full.

5.3 Staff recognise that pupils with special educational needs and disabilities (SEND) are statistically more vulnerable to abuse. Vigilance must be maintained at all times.

5.4 If a member of staff observes physical changes (e.g., unexplained marks, bruising, soreness) or changes in a pupil's emotional presentation during intimate care, they must report this immediately to the Designated Safeguarding Lead (DSL) and record the concern on the school's safeguarding system. Any subsequent referral to Children's Social Care will follow standard safeguarding protocols.

5.5 If a pupil becomes unusually distressed or unhappy about being assisted by a specific member of staff, the Headteacher must be informed immediately. Staffing schedules will be adjusted straight away to ensure the child's safety and well-being, while the matter is formally investigated in consultation with parents/carers.

5.6 If a pupil makes a disclosure or allegation against a staff member, or if a staff member observes improper practice by a colleague during intimate care, this must be reported directly to the Headteacher (or Chair of Governors if the allegation concerns the Headteacher) in accordance with the school's Managing Allegations against Staff Procedures and Whistleblowing Policy. Where applicable, the Local Authority Designated Officer (LADO) will be contacted immediately.

