



INTIMATE CARE POLICY



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At a glance

This policy explains our approach to intimate care across our organisation.

Oasis is a family with a shared vision for community, a place where everyone is included, making a contribution and reaching their God-given potential. The pastoral care of our children is central to the Oasis ethos. We are committed to developing positive and caring attitudes in our children and adults.

Intimate care should 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 young age, physical difficulties or other special needs. Examples include care associated with continence, medical needs and menstrual management as well as more ordinary tasks such as help with washing, toileting or dressing.

No child is excluded from participating in activities, or any part of the school day, who may, for any reason, have intimate care needs, such as not yet being toilet trained/incontinent and who may still be wearing nappies or pads whatever their age.

We will work with parents towards achieving toilet training for their children at the appropriate age. We hope that most children will be toilet trained before starting school. Sometimes there are medical or other developmental reasons why this may not be possible.

Wherever possible intimate care, including toileting, is a self-care skill that we will support children to acquire in partnership with their parents. It is our intention to develop independence in each child, however there will be occasions when help is required.

Checklist

- We will ensure that every child is kept safe by adults following the guidance in this policy and our Safeguarding policy.
- We will ensure that each academy follows the procedures outlined in this policy for intimate care.
- We will ensure that children have personal privacy appropriate to their age and their ability, and, in line with the Oasis ethos and nine habits, are valued, respected and treated with dignity as individuals.
- We will work with parents and carers to ensure that families are given guidance and support to ensure that almost all children are toilet trained before starting school
- We will ensure that every child has the right to be involved and consulted in their own intimate care, appropriate to their age and their ability.

- We respect that every child has the right to express their views on their own intimate care and will have their views taken into account.
- We understand that each child has the right to high quality intimate care that is delivered with as much consistency as possible.
- We will safeguard adults involved in intimate care procedures.
- We will ensure that adults involved in intimate care are given the training that is required.
- We will ensure that those responsible for the intimate care of children will undertake their duties in a professional manner at all times.
- We will inform parents/carers about how and when intimate care is administered.
- We will ensure parents/carers are consulted about the intimate care of their child/children.
- We will ensure that all children who are known to require support with management of their bladder and/or bowel care or personal hygiene in school will have an individual care plan, which will be agreed with the parents / carers and learner (where they are able to participate).
- We will ensure where a care plan is not in place, parents/carers will be informed the same day if their child has needed help with meeting intimate care needs (e.g., has had an 'accident' and wet or soiled him/herself). Communication will be verbal – either face to face or by using the telephone.
- We will ensure clothing contaminated with urine or faeces is changed as soon as possible and placed in a plastic bag to be sent home discreetly with the child for laundering, unless the care plan states otherwise.

In brief

Partnerships with parents and carers

Adults at all our academies work in partnership with families and carers to provide care appropriate to the needs of the individual child. If a care plan is required for a child with additional needs, it will set out and detail the following:

- Parents are empowered and encouraged to work with staff to ensure their child's needs are identified, understood and met.
- Who will carry out the care.
- Where the intimate care will take place.
- Number of staff needed to carry out the task (if more than one person is required, reason will be documented).
- Additional equipment or resources required, and if this equipment / resources will be provided by the academy or by home.
- Child's preferred means of communication (e.g., visual, verbal). Agree terminology for parts of the body and bodily functions.

- Child's level of ability, i.e., what tasks they are able to do by themselves, and opportunities for developing independence are taken.
- Acknowledgment and respect for any cultural or religious sensitivities related to aspects of intimate care.
- Arrangements for transport and trips are taken into account.
- The care plan will be regularly monitored and reviewed in accordance with the child's development.
- The parents or carers of young children joining one of our academies should be asked to complete an intimate care permission form (see Appendix 1).

Safeguarding

The safety of children and adults is of paramount importance.

- We recognise that pupils with special needs or who are disabled are particularly vulnerable to all types of abuse.
- Intimate care involves risks for children and adults as it may involve staff touching the private parts of a pupil's body. All adults who are involved in intimate care and others in the vicinity will be encouraged to be vigilant at all times, to seek advice where relevant and to take account of safer working practice.
- Only suitably trained Oasis Staff will undertake intimate care, this role will not be delegated to volunteers. All staff undertaking intimate care will have an enhanced DBS. Any medical staff visiting the academy who need to be involved in intimate care will confirm their enhanced DBS status before undertaking any care.
- Staff involved with intimate care need to be vigilant to any issues that may require referrals to health or other agencies. Any safeguarding concerns arising from routine intimate care will be recorded on CPOMS as this could build a pattern over time.
- If a member of staff has any concerns about physical changes in a pupil's toileting habits or presentation, e.g., unexplained marks, bruises, etc s/he will immediately report concerns to the designated safeguarding lead (DSL). A clear written record of the concern will be completed on CPOMS, and a referral made to Children's Services Social Care if appropriate, in accordance with the academy child protection procedures.
- An individual member of staff should inform another appropriate adult when they are going alone to assist a pupil with intimate care.
- In order to reduce potential safeguarding risks, where appropriate, pupils will be taught personal safety skills carefully matched to their level of development and understanding.
- Best practice is that all instances of intimate care should be recorded to assist with any discrepancies that may arise between home and school toileting habits. A Personal Care Log is recommended, created using Microsoft Forms

to enable timely and efficient recording. These logs should be monitored and reviewed to identify any patterns which may cause concern over time.

- If a pupil becomes unusually distressed or very unhappy about being cared for by a particular member of staff, this should be reported to the Principal/ DSL. The matter will be investigated at an appropriate level (usually the principal) and outcomes recorded. Parents/carers will be contacted as soon as possible in order to reach a resolution. Staffing schedules may be altered temporarily, if needed, until the issue/s is/are resolved so that the child's needs remain paramount. Further advice will be taken from outside agencies if necessary. This will be recorded on CPOMS.
- If a pupil, or any other person, makes an allegation against an adult working at the academy this should be reported to the principal (or to the Regional Director if the concern is about the principal) who will consult the Local Authority Designated Officer (LADO).
- It is important that through any process which follows an allegation the welfare of our staff is taken into consideration.

Children

All pupils will be supported to achieve the highest level of autonomy that is possible given their age and ability. Staff will encourage each individual pupil to do as much for him/herself as possible.

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

There must be careful communication with each pupil who needs help with intimate care in line with their preferred means of communication (verbal, symbolic, etc) to discuss their needs and preferences. Where the pupil is of an appropriate age and level of understanding, permission should be sought before starting an intimate procedure.

Staff who provide intimate care should speak to the pupil personally by name, explain what they are doing and communicate with all children in a way that reflects their ages.

Every child's right to privacy and modesty will be respected. Careful consideration will be given to each pupil's situation to determine who and how many carers might need to be present when s/he needs help with intimate care. Reducing the numbers of staff involved goes some way to preserving the child's privacy and dignity. Wherever possible, the pupil's wishes and feelings should be sought and taken into account.

The religious views, beliefs and cultural values of children and their families should be taken into account, particularly as they might affect certain practices or determine the gender of the carer.

Record keeping

If a child has an ongoing need for support with intimate care, then a care plan must be completed. Please see the individual health care plan (IHCP) template in the Medical Needs and Medicines Policy (Appendix 5). You can find this on the OasisZone, under Policies (staff) and then the OCL Policy Portal. Then search for Medical Needs and Medicines Policy. The individual plan also allows for the recording of each intimate need event. Recording on CPOMs is only required if it is considered that intimate care may be related to a safeguarding concern.

An intimate care permission form should be given to parents of the youngest pupils as they join our academies to complete and return to the academy. This can be found at Appendix 1.

Intimate care linked to medical needs

Some pupils may require assistance with invasive or non-invasive medical procedures. These procedures will be discussed with parents/carers, documented in the health care plan or Education Health Care Plan and will only be carried out by staff who have been trained to do so.

Intimate care that involved the administration of medication such as blood glucose monitoring or the injection of insulin etc will not be undertaken in the toilet.

A record of each time a child is given support with an invasive or non-invasive medical procedure must be kept within the IHCP (Individual Health Care Plan).

It is important that these trained staff follow appropriate infection control guidelines and ensure that any medical items are disposed of correctly.

Practical guidance

Urine, faeces, blood and vomit will be cleaned up immediately and disposed of safely. When dealing with body fluids, adults wear protective clothing (disposable plastic gloves and aprons) and wash themselves thoroughly afterwards with soap and hot water.

Soiled children's clothing will be bagged to go home (staff should not rinse it).

Children will be kept away from the affected area until the incident has been completely dealt with.

All staff must maintain high standards of personal hygiene and will take all practicable steps to prevent and control the spread of infection.

Nappy changing and toilet training

We work closely with parents and carers to ensure that children are toilet trained by the time they start in Nursery or Reception.

We understand that there are occasions when children are unable to use the toilet successfully when they start school or may have an additional need which means that they have to use nappies. Children will never be refused admission to school due to continence difficulties. Oasis academies provide an inclusive education and all children with ongoing continence issues will be supported through Individual Healthcare Plans (IHCPs). We may also seek support from external agencies to cater for level of need within our setting.

Children should be encouraged to communicate their needs and will be checked by staff throughout the day to identify when a change is needed.

Children should be given an explanation of where they are going, and the time should be used effectively to communicate one to one.

Children should always be changed in an agreed location, following the correct procedures. Children should NEVER be left unattended.

Example procedure:

- Collect the child's nappy bag. This should be provided by the family and information about changing routines and toilet training shared on induction.
- Check allergy information.
- Aprons and gloves MUST be worn by staff to prevent cross contamination and to safeguard both children and staff. These should be disposed of after each change. Staff should be aware of best practice regarding infection control.
- Remove clothing – encouraging independence as appropriate.
- Remove nappy. This is to be put in a nappy sack and then placed in the nappy bin.
- The child should be cleaned with wipes provided from home.
- Put on a clean nappy.
- Pull on clothes– encouraging independence as appropriate. Larger children should be standing on the floor to pull up clothes. Children should never be allowed to stand on a changing surface.
- Wash hands.
- Complete a Personal Care Log via Microsoft Forms.
- Report to parents/carers when the child is collected or earlier where needed.

- Where safeguarding concerns arise notify the DSL. Complete the intimate care record on CPOMS and work with parent/carers to ensure advice is sought from health care professionals where appropriate.

Toilet training

It is essential to work in partnership with families on toilet training. Effective communication is vital to ensure continuity for the child and to support children and families to feel comfortable and at ease. Home routines will be followed where possible at the academy.

Toilet accidents / incontinence

Children from time to time have toileting accidents as a natural part of growing up, developing independence and learning to meet their own needs.

Children with specific additional needs or medical conditions may also have accidents or chronic incontinence or encopresis.

A child will require a care plan if toileting needs are not the norm or accidents become frequent.

Staff should be sensitive to each individual child's circumstances and stage of development and do their best to meet their needs and be respectful.

The child's dignity will always be considered, and care will be conducted in a controlled, but private environment. If a child has a toileting accident, they should be encouraged to clean themselves in a stage appropriate way.

Assistance should be given as required using toilet paper and/or wipes. (Check allergy information.) A child should be provided with clean clothes. Spare clothes should be provided by home to ensure dignity and comfort for the child. Academies will have a limited selection of clothes and spares, but stock is limited and academies are not always able to ensure exact sizing matches. Clothes used from academy stock should be washed and bought back to the setting as soon as possible. Soiled clothes should be placed in a bag.

A log of intimate care should be completed, and parent(s)/carer(s) should be informed e.g., on collection of the child or by telephone. The area the child had the accident in should be cleaned appropriately in line with academy procedures.

Staff involved with intimate care need to be vigilant to any issues that may require referrals to health or other agencies. If a member of staff has any concerns about

physical changes in a pupil's toileting habits s/he will immediately report concerns to the DSL. A clear written record of the concern will be completed on CPOMs.

Responsibilities

The principal is responsible for:

- Ensuring that intimate care is conducted professionally and sensitively.
- Ensuring that the intimate care of children is carefully planned, including the creation of individual plans following discussions with the parent and the child and with input from the SENCO and/or medical teams if linked to chronic illness.
- Communicating with parents in order to establish effective partnerships when providing intimate care to children.
- Ensuring that adults are given suitable training to enable them to undertake the actions identified on the plan.
- Ensuring that staff recruitment includes an understanding that intimate care may be part of some adult's roles in school

The Regional Director is responsible for ensuring that there are suitable arrangements for intimate care in place across the region, in line with this policy.

Training requirements

Those adults undertaking intimate care tasks must follow academy guidance and the training given.

If the intimate care task is linked to a particular medical need, then specific training must be given to the adult(s) before the care is given to a child.

Localised, academy induction training for new staff must include a summary of the academy's practice for intimate care based on the guidance outlined in this Trust policy.

Staff who provide intimate care should be trained in personal care (e.g., moving and handling) according to the needs of the pupil. Staff should be fully aware of best practice regarding infection control, including the requirement to wear disposable gloves and aprons.

Volunteers or temporary staff should not carry out intimate care procedures.

Statutory requirements

Statutory requirements are outlined in the OCL Safeguarding Policy as well as the following documents:

- Keeping Children Safe in Education.
- The Statutory Framework for the Early Years Foundation Stage.
- The Children and Families Act (2014).
- The Equality Act.
- Health Act.
- Special Educational Needs Code of Practice.

Please also see further detail in the following policies:

- OCL Health and Safety Policy.
- OCL Medical Needs and Medicines Policy.

Localisation of this policy

Academies must use this policy to underpin their own localised day to day practice guidance and CPD for staff.

RACI Matrix

“R” for anyone who is “Responsible” for a task listed in the policy, an “A” for anyone who is “Accountable”, a “C” for anyone who must be “Consulted” under the policy and “I” for anyone who must be “Informed” about aspects of the policy.

Policy Element	Board	Leadership			Academy			
		OCL CEO	OCL COO	Regional Director	Academy Principal	Early Years leader	Class teacher	Teaching assistant
We will ensure that every child is kept safe by adults following the guidance in this policy and our Safeguarding policy.	R	R	I	R	A	C	C	C
We will ensure that each academy follows the procedures outlined in this policy for intimate care.	I	I	I	R	A	R	R	R
We will ensure that children have personal privacy, and, in line with the Oasis ethos and nine habits, are valued, respected and treated with dignity as individuals.	I	I	I	R	A	R	R	R
We will ensure that every child has the right to be involved and consulted in their own intimate care, appropriate to their age and their ability.	I	I	I	R	A	R	R	R

We respect that every child has the right to express their views on their own intimate care and will have their views taken into account.	I	I	I	R	A	R	R	R
We understand that each child has the right to high quality intimate care that is delivered in as much consistency as possible.	I	I	I	R	A	R	R	R
We will safeguard adults involved in intimate care procedures.	I	I	I	R	A	A	C	C
We will ensure that adults involved in intimate care are given the training that is required.	I	I	I	R	A	A	C	C
We will ensure that those responsible for the intimate care of children will undertake their duties in a professional manner at all times.	I	I	I	R	A	A	C	C
We will inform parents/carers about how and when intimate care is administered.	I	I	I	R	A	A	C	C
We will ensure parents/carers are consulted about the intimate care of their child/children.	I	I	I	R	A	A	C	C
We will ensure that all children who are known to require support with management of their bladder and/or bowel care or personal hygiene in school will have an individual care plan, which will be agreed with the parents / carers and learner (where they are able to participate).	I	I	I	R	A	A	A	C
We will ensure where a care plan is not in place, parents/carers will be informed the same day if their child has needed help with meeting intimate care needs (e.g., has had an 'accident' and wet or soiled him/herself). Communication will be verbal – either face to face or by using the telephone.	I	I	I	R	A	A	A	A

<p>We will ensure clothing contaminated with urine or faeces is changed as soon as possible and placed in a plastic bag to be sent home discreetly with the child for laundering, unless the care plan states otherwise.</p>	I	I	I	R	R	A	A	A
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APPENDIX 1 – INTIMATE CARE PERMISSION FORM

INTIMATE CARE PERMISSION FORM

PERMISSION FOR ACADEMY TO PROVIDE INTIMATE CARE	
Name of child	
Date of birth	
Male / Female	
Class	
Address	
Family Contact Details	
Name	
Contact number	
Relationship to child	
Address	
I give permission for the academy to provide appropriate intimate care to my child (e.g. changing soiled clothing, washing and toileting)	<input type="checkbox"/>
I will advise the academy of anything that may affect my child's personal care (e.g. if medication changes or my child has an infection)	<input type="checkbox"/>
I understand the procedures that will be carried out and I will contact the academy immediately if I have any concerns	<input type="checkbox"/>
<p>I do not give consent for my child to be washed and changed in case of a toileting accident.</p> <p>Instead, the academy will contact me or my emergency contact and I/they will organise for my child to be washed and changed.</p> <p>I understand that if the academy cannot reach me or my emergency contact, staff will need to wash and change my child, following the academy's intimate care policy, to ensure comfort and remove barriers to learning.</p>	<input type="checkbox"/>
Name of parent / carer	
Parent / carer signature	
Relationship to child	
Date	

Document Control

Changes History

Version	Date	Owned and amended by	Recipients	Purpose
1.0	May 2024	Chris Chamberlain	Principals	Ensure best practice in intimate care

Policy Tier

- Tier 1
 Tier 2
 Tier 3
 Tier 4

Owner

Chris Chamberlain, National Director for Primary

Contact in case of query.

chris.chamberlain@oasisuk.org

Approvals

This document requires the following approvals.

Name	Position	Date Approved	Version
Directors' group		May 2024	1.0

Position with the Unions

Does the policy or changes to the policy require consultation with the National Unions under our recognition agreement?

- Yes
 No

If yes, the policy status is:

- Consulted with Unions and Approved
 Fully consulted (completed) but not agreed with Unions but Approved by OCL
 Currently under Consultation with Unions
 Awaiting Consultation with Unions

Date & Record of Next Union Review
Not applicable / Insert

Location

Tick all that apply:

- OCL website
- Academy website
- Policy portal
- Other: state

Customisation

- OCL policy
- OCL with an attachment for each academy to complete regarding local arrangements.
- Academy policy
- Policy is included in principals' annual compliance declaration.

Distribution

This document has been distributed to:

Name	Position	Date	Version