

Intimate Care Policy

Next Review December 2025



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1. Rationale

Holmes Chapel Comprehensive takes seriously its responsibility to safeguard and promote the welfare of the children and young people in its care. Meeting a pupil's intimate care needs is one aspect of safeguarding.

Holmes Chapel Comprehensive will act in accordance with Section 175 of the Education Act 2002 and the Government guidance 'Safeguarding Children and Safer Recruitment in Education' 2011 to safeguard and promote the welfare of pupils at this school.

Holmes Chapel Comprehensive recognises its duties and responsibilities in relation to the Equalities Act 2010 which requires that any pupil with an impairment that affects his/her ability to carry out day-to-day activities must not be discriminated against.

Intimate care can be defined as any care which carries out a procedure to intimate personal areas. It also includes supervision of pupils involved in intimate self-care. Examples include care associated with incontinence and menstrual management as well as help with washing, toileting, dressing or providing physiotherapy.

2. Purpose

Holmes Chapel Comprehensive is committed to ensuring that all staff responsible for the intimate care of pupils, will undertake their duties in a professional manner at all times and with sensitivity to meet the individual's needs. This Intimate Care Policy has been developed to safeguard children and staff. It applies to everyone involved in the intimate care of our students. It is acknowledged that these adults are in a position of great trust.

3. Guidelines

- Students will be treated with respect and dignity when intimate care is provided, irrespective of their age, gender, disability, religion, ethnicity or sexual orientation.
- The student's welfare is of paramount importance and his/her experience of intimate and personal care should be a positive one.
- It is essential that every student is treated as an individual and that care is given safely and with sensitivity to their individual needs.
- All pupils will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each individual pupil to do as much for his/herself as possible.

- Staff will work in close partnership with parent/carers and other professionals to share information and provide continuity of care.
- Where pupils with complex and/or long term health conditions have a health care plan in place, the plan should, where relevant, take into account the principles and best practice guidance in this intimate care policy.
- Where the pupil is of an appropriate age and level of understanding permission should be sought before starting an intimate procedure.

4. Roles and Responsibilities

- All staff should be aware of the school's confidentiality policy. Sensitive information will be shared only with those who need to know. This will be outlined in the individual care plans for the students.
- Health care plans should be reviewed and updated at least annually and following any change to circumstances.
- 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. This process is outlined in the schools medical conditions policy.
- All staff will be informed on appointment of their duties with regard to personal care.
- All staff required to manually lift or handle students will have received the appropriate training.
- All staff undertaking intimate care must be given appropriate training.

5. Safeguarding

From a child protection perspective it is acknowledged that intimate care involves risks for children and adults because of the personal nature of the procedures performed. All staff will be encouraged to be vigilant at all times, to seek advice where relevant and to take account of safer working practice. Adults who assist pupils with intimate care should be employees of the school, not students or volunteers, and therefore have the usual range of safer recruitment checks, including enhanced DBS checks.

The school's child protection procedures will be adhered to at all times. If a member of staff has any concerns about physical changes in a pupil's presentation, e.g. unexplained marks, bruises, etc he/she will immediately report concerns to the designated safeguarding lead. A clear written record of the concern will be completed and a referral made to Children's Services Social Care if appropriate, in accordance with the school's child protection procedures.

If a pupil becomes unusually distressed or unhappy about being cared for by a particular member of staff, this should be reported immediately to a designated safeguarding lead. The matter will be investigated at an appropriate level and outcomes will be recorded. Parents/carers will be contacted as soon as possible in order to reach a resolution. Staffing schedules will be altered 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.

If a pupil, or any other person, makes an allegation against an adult working at the school, this should be reported to the safeguarding lead, who will consult the Local Authority Designated Officer in accordance with the school's policy: Dealing with Allegations of Abuse against Members of Staff and Volunteers. It should not be discussed with any other members of staff or the member of staff the allegation relates to.

Similarly, any adult who has concerns about the conduct of a colleague at the school or about any improper practice will report this to the safeguarding lead, in accordance with the child protection procedures and 'whistle-blowing' policy.

6. Physiotherapy and Massage

If it is agreed in a student's EHCP or care plan that a member of the school staff should undertake part of the physiotherapy regime (such as assisting children with exercises), then the required technique must be demonstrated by the physiotherapist personally with written guidance given and updated regularly. The physiotherapist should observe the member of staff applying the technique and ensure best practice.

Under no circumstances should school staff devise and carry out their own exercises or physiotherapy programs.

Any concerns about the regime or any failure in equipment should be reported to the physiotherapist.

Massage is now commonly used with pupils who have complex needs and/or medical needs in order to develop sensory awareness, tolerance to touch and as a means of relaxation. Massage should only be undertaken by designated school staff and confined to parts of the body such as the hands, feet and face in order to safeguard the interest of both adults and pupils, unless this has been authorised by senior management and following the recommendation from appropriate outside agencies.

Any adult undertaking massage for pupils must be suitably qualified and/or demonstrate an appropriate level of competence as judged by monitoring from the appropriate outside agencies involved with the student.

7. Medical Procedures

Care plans should include specific information for those supporting children with bespoke medical needs.

Pupils who are disabled might require assistance with invasive or non-invasive medical procedures such as the administration of rectal medication, managing catheters or colostomy bags. These procedures will be discussed with parents/carers, documented in the health care plan and will only be carried out by staff who have been trained to do so.

In relation to record keeping, a written record should be kept in a format agreed by parents and staff every time a child has an invasive medical procedure, e.g. support with catheter usage.

Any members of staff who administer first aid should be appropriately trained in accordance with LA guidance. If an examination of a child is required in an emergency aid situation it is advisable to have another adult present, with due regard to the child's privacy and dignity

8. Toileting and Personal care

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 Toileting and personal care. Holmes Chapel will reduce the numbers of staff involved in providing this support in order to preserve the student's privacy and dignity.

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.

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.