The Corner School: Intimate Care Policy

Owner:	Headteacher
Author:	SENCO and Inclusion Lead
Approvers:	Education Committee
Last Review:	November 2025
Next Review Date: ***(Reviewed annually - updates in response to changes in legislation and best practice will occur as and when needed.)***	November 2026

- This policy is written in accordance with all legal requirements and best practice
- Equal Opportunities: This policy will never discriminate directly or indirectly against the 9 protected characteristics. Equality of opportunity should be provided for all employees in accordance with the Equality Act (2010). Individuals are invited to provide information about any equality or diversity issues that may be relevant. UP may consider making adjustments to this policy in appropriate circumstances when feasible and in keeping with organisational needs.
- Data Protection: Personal data collected and processed in relation to this policy is managed in accordance with Unlocking Potential's Data Protection Policy.
- The school aims to design and implement services, policies and procedures that meet the diverse needs of our provision, population and workforce, ensuring that none are placed at an unreasonable or unfair disadvantage over others. We are confident that this policy does not place anyone at an unreasonable or unfair disadvantage and is compliant with relevant equalities legislation. Where the school or staff are referred to, the policy and the following procedures apply to all staff
- Policy Status: This policy is not a contractual term of employment, and it may be varied by UP at any time

Contents

1. Introduction

This policy applies to everyone involved in the intimate care of pupils regardless of their position within the school provision.

The Corner School 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.

We recognise that there is a need to treat all pupils with respect when intimate care is given. No pupil should be attended to in a way that causes loss of dignity, distress, embarrassment or pain. Pupils will be taught the appropriate skills at any stage to help them become as independent as possible.

This policy aims to protect both those being cared for and those who care for pupils. We take the view that everyone is safer if expectations are clear, and approaches are as consistent as possible.

2. Legislation

- Children Act 1989 & 2004
- Childcare Act 2006
- Health and Safety at Work Act 1974
- Equality Act 2010
- S175 / S57 Education Act 2002 (local authorities, governing bodies of maintained schools and institutions in the further education sector)
- Education (Independent School Standards) (England) Regulations 2014
- London Child Protection Procedures September 2023
- Working Together to Safeguard Children 2023
- Keeping Children Safe in Education 2023
- Mental Capacity Act 2005

Statutory guidance (*the current guidance of Working Together to Safeguard Children. Keeping Children Safe in Education and London Multi-Agency Adult Safeguarding Policy and Procedures*), requires the development of local guidelines and training for staff on good practice in intimate care for people with disabilities. We will follow this guidance in the care of vulnerable children attending our school. This document meets this statutory requirement and is also applicable to pupils without disabilities.

3. Related Policies:

This policy should be read in conjunction with other policies including:

- Child Protection Policy
- SEND Policy
- Whistleblowing
- Managing Allegations & Low-Level Concerns Policy
- Health & Safety Policy
- Staff Recruitment Policy
- Physical Intervention Policy
- Anti-bullying Policy
- Accessibility Pan

4. Our School

The Corner School is an independent primary school for pupils with SEMH as their primary need and additional complex needs. All pupils at The Corner School have been identified with Social, Emotional and Mental Health needs with additional complex needs and health conditions including anxiety, ADHD, ASD, PDA, OCD, ODD, Adverse Childhood Experiences (ACEs), attachment difficulties, developmental trauma or delay, speech and language difficulties and learning difficulties, but this list is not exhaustive. Many of our

pupils will display some challenging behaviour. All pupils at The Corner School have an EHCP due to their complex needs.

5. Definition

Our definition of intimate care is any personal care activity a child would normally be able to do for themselves, which involves washing, touching or carrying out an invasive procedure (such as cleaning up after a child has soiled themselves) to intimate personal areas. In most cases, such care will involve procedures to do with personal hygiene and the cleaning of equipment associated with the process as part of a staff member's duty of care.

6. Best Practice Principles

Planning Intimate Care

- The management of all students with intimate care needs will be carefully planned where appropriate.
- Intimate care arrangements will be discussed with parents or carers as appropriate and recorded on students' care plans if there is one. The needs and wishes of pupils and their parents or carers will be taken into account wherever possible within the constraints of staffing and equal opportunities legislation.
- Individual intimate care plans (see Appendix 2) will be drawn up for particular pupils in line with their individual circumstances (if appropriate). A pupil's view on their Intimate Care Plan is sought wherever possible. However, if they are considered to lack capacity with this particular decision, other adults/advocates acting in their best interests can decide on their behalf in agreement with parents or carers (if appropriate for the situation). Parents or carers would usually be the best advocate for their young person and can express their views with regard to intimate care using the consent form at Appendix 1.
- Intimate Care may be included on Health Care plans (if appropriate) and any other plans which identify the support of intimate care where appropriate.

Providing Intimate Care

- Wherever possible, staff should only care intimately for more aware students of the same sex. Male staff will not carry out intimate care procedures on female students. Female staff will assist in the needs of male students with significant learning difficulties and lower levels of awareness because the majority of our staff are female, and this may be the only practical option.
- Careful consideration will be given to each situation to determine how many staff might need to be present when a pupil is assisted. Where possible, one student will be assisted by one adult unless there is a sound reason for having more staff present. If two adults are required the reasons should be clearly documented.
- The most appropriate environment (e.g. a changing room, medical room or adapted areas of a specified toilet) should be selected to ensure privacy and dignity at all times.
- Care should always be undertaken with tact, sensitivity and in an unhurried manner.
- Gloves should be worn.
- If washing is required, staff must use a disposable cloth or wet wipe. Emphasis should be on staff providing the minimum level of assistance and intervention, compatible with the circumstances and needs. Pupils will be supported to achieve the highest level of independence that is possible

given their age and stage of development. Staff will encourage each pupil to do as much independently as they can, with a focus on reducing prompt levels. This may mean giving the student responsibility for washing themselves.

- Staff will be supported to adapt their practice in relation to the needs of individual students considering developmental changes such as the onset of puberty and menstruation.
- Dealing with Toilet Accidents:
  - Accidents and unexpected soiling will sometimes occur. On these occasions there may not be a personalised care plan in place or prior parents or carers agreement.
  - In some situations (e.g. needing to wash a pupil after a toilet accident) and where the delay will not cause distress, a phone agreement can be sought.
  - All staff will ensure that any soiling incidents are dealt with quietly and respectfully to avoid any embarrassment
- Pupils, parents, carers and staff all have responsibilities linked to intimate care:
  - Pupils must be taught strategies to make their need for the toilet clear either verbally, by communication device, method, system or using a sign or symbol.
  - Staff will ensure that all students have regular opportunities and encouragement to go to the toilet at suitable times during the day.
  - Parents or carers must keep their young people who are unwell away from school.

7. Working with Parents and Carers

- Partnership with parents and carers is an important principle in any educational setting and is particularly necessary in relation to students needing intimate care.
- Much of the information required to make the process of intimate care as comfortable as possible is available from parents and carers, including knowledge and understanding of any religious or cultural sensitivities.
- Parents and carers should be encouraged and empowered to work with staff to ensure their child's needs are identified, understood and met including Health Care plans and any other plans that identify the support of intimate care.
- The views of the student should be actively sought, wherever possible, when drawing up and reviewing formal arrangements.
- Exchanging information with parents and carers is essential through personal contact, telephone or correspondence

8. Pupil Voice

- Pupils will be allowed to express a preference regarding the choice of their staff carer and sequence of care, subject to their age and understanding. It may be possible to determine preferences or wishes by observation of reactions to the intimate care.
- It is the responsibility of all staff caring for a student to ensure they are aware of the preferred method and level of communication. Communication methods may include words, signs, and symbols.
- To ensure effective communication, staff should ascertain the agreed method of communication and identify this in any agreed Intimate Care Plan.

- Appropriate terminology for private parts of the body and functions to be used by staff should be in line with our Relationships and Sex Education (RSE) curriculum and agreed vocabulary.
- Where there is any doubt that a child is able to make an informed choice on these issues, parents or carers can be in the best position to act as advocates.

9. Vulnerability to Abuse

- Students should be encouraged to recognise and challenge inappropriate assistance and behaviour that erodes their dignity and self-worth. Staff should be encouraged to listen to the student at all times. The following are factors that can increase vulnerability:
  - Young people who need help with intimate care are statistically more vulnerable to exploitation and abuse.
  - Young people with disabilities may have less control over their lives than others.
  - Young people who need help with intimate care do not always receive sex and relationship education and may therefore be less able to recognise abuse. Young people who need help with intimate care may not be able to distinguish between intimate care and abuse.
  - Young people who need help with intimate care may experience multiple carers.
  - Young people who need help with intimate care may not be able to communicate.

10. Concerns about Safeguarding

- All staff must read the latest version of Keeping Children Safe in Education Part 1, Working Together to Safeguard Children, TCS's Child Protection Policy and Procedures, Code of Conduct, and UP's Protection Managing Allegations Against Staff policy.
- 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 using the school's safeguarding procedures.
- If the behaviours of a student cause staff members to feel uncomfortable, a care plan should be amended to state that two staff members must be present at all times.
- If a child or young adult appears sexually aroused, misunderstands or misinterprets an action or instruction, the incident should be reported immediately to Designated Safeguarding Lead or one of the safeguarding deputies and entered on CPOMS.

Allegations of Abuse

- All staff working in intimate situations with students can feel particularly vulnerable. The school policies can help to reassure both staff involved and parents and carers of students receiving intimate care.
- If a student is hurt accidentally or there is an issue when carrying out the procedure, they should be reassured immediately and the staff member should check that they are safe. The incident must be reported immediately to the Designated Safeguarding Lead or one of the safeguarding deputies and entered on CPOMS.
- 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 and managing allegations against staff procedures.
- Action should be taken immediately should there be a discrepancy of reports between a student and member of staff, particularly with reference to time spent alone together.

- It is advised that the support role be changed as quickly as possible, should such a discrepancy occur, and then reviewed on a regular basis.

11. Appendix:

Appendix 1

Consent Form - Permission For School to Provide Intimate Care	
Name of child	
Date of birth	
Name of parent/carer	
Address	
I do give permission for the school to provide appropriate intimate care to my child (e.g. changing soiled clothing, washing and toileting)	□
I will advise the school of anything that may affect my child's personal care (e.g. if medication changes or my child has an infection)	□
I understand the procedures that will be carried out and I will contact the school immediately if I have any concerns	□
I **do not** give consent for my child to be washed and changed in case of a toileting accident. Instead, the school will contact me or my emergency contact and I/they will organize for my child to be washed and changed. I understand that if the school cannot reach me or my emergency contact, staff will need to wash and change my child, following the school's intimate care policy, to ensure comfort and remove barriers to learning.	□
Parent/carer signature	
Name of parent/carer	
Relationship to child	
Date	

Appendix 2

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

Intimate care plan	
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 Voice	
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	
Review This plan will be reviewed twice a year.	Next review date: To be reviewed by: