



# St Thomas of Canterbury

## Catholic Primary School

Where every child is special



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## Intimate Care Policy

To be reviewed in October 2024



### OUR MISSION STATEMENT

*God's love is at the heart of our Catholic School family.*

*We show this in our respect, kindness and love for others and by treating other people as we wish to be treated ourselves.*

*We will encourage everyone to be the best that we can be.*

### OUR SCHOOL AIMS

To guide our children to grow in the love of God and build relationships that will enable them to make a positive contribution to the school and society.

To develop an exciting, challenging and creative curriculum that produces confident and successful learners who are the best that they can be.

To develop high quality learning that enables every child to flourish, to discover their talents and be lifelong learners.

To establish a teaching and learning environment that encourages everyone to enjoy, to achieve, to be inclusive, to be healthy, and to stay safe.

To nurture a strong partnership between home and school.

To have respect and understanding for our school, our community and our world, helping our children to become responsible citizens and good role models.

### OUR SHARED VISION

*Every child* at St Thomas of Canterbury is special and will achieve their full potential academically, socially, spiritually and emotionally through the provision of a loving community and rich and varied learning opportunities and the highest quality teaching and learning.

*Every staff member* at St Thomas of Canterbury will feel valued and enabled to provide the opportunities that we want for our children and to do so as part of a loving community which has the highest expectations of and for all.

*Every Governor* at St Thomas of Canterbury will feel valued and enabled to act as a critical friend to the School and to be accountable for the School's strategy. They will play a visible role supporting all children, their parents and staff at School and in the wider community, to provide the best environment possible for learning and spiritual growth.

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## OUR GOLDEN RULE

We treat others as we would like to be treated

### Introduction

- 1.1 Staff who work with young children, children or young people\* who have special needs will realise that the issue of intimate care is a difficult one and will require staff to be respectful of children's needs.
- 1.2 Intimate care can be defined as care tasks of an intimate nature, associated with bodily functions, body products and personal hygiene which demand direct or indirect contact with or exposure of the genitals. Examples include care associated with continence and menstrual management as well as more ordinary tasks such as help with washing or bathing.
- 1.3 Our policy at St Thomas of Canterbury Catholic Primary School, is designed to promote good practice and therefore safeguard children and practitioners; they apply to everyone involved with the intimate care of children.

We aim to:

- safeguard the rights and promote the welfare of children
  - provide guidance and reassurance to staff whose role includes intimate care
  - assure parents that staff are knowledgeable about personal care and that their individual concerns are taken into account.
- 1.4 Staff at St Thomas of Canterbury Catholic Primary School follow *the Intimate Care and Toileting policy guidance 2014-15* on the Surrey County Council Website.
  - 1.5 Children's dignity will be preserved and a high level of privacy, choice and control will be provided to them. Staff that provide intimate care to children have a high awareness of child protection issues. Staff behaviour is open to scrutiny and staff at St Thomas of Canterbury School work in partnership with s/carers to provide continuity of care to children/young people wherever possible.
  - 1.6 Children's intimate care needs cannot be seen in isolation or separated from other aspects of their lives. Encouraging them to participate in their own intimate or personal care should therefore be part of a general approach towards facilitating participation in daily life. All children have the right to be safe and to be treated with dignity and respect. Disabled children can be especially vulnerable. Staff involved with their intimate care need to be sensitive to their individual needs. Staff also need to be aware that some adults may use intimate care, as an opportunity to abuse children. It is important to bear in mind that some care tasks / treatments can be open to misinterpretation. Adhering to the settings policy and procedure guidelines should safeguard children and practitioners.



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1.7 Staff deliver a full personal safety curriculum, as part of Personal, Social and Health Education, to all children as appropriate to their developmental level and degree of understanding. This work is shared with parents who are encouraged to reinforce the personal safety messages within the home.

1.8 St Thomas of Canterbury School is committed to ensuring that all staff responsible for the intimate care of children will undertake their duties in a professional manner at all times. St Thomas' recognises that there is a need to treat all children with respect when intimate care is given. No child should be attended to in a way that causes distress or pain.

## **2.0 Our approach to best practice**

2.1 All children who require intimate care are treated respectfully at all times; the child's welfare and dignity is of paramount importance.

2.2 Staff who provide intimate care are trained to do so (including Child Protection and Health and Safety training in moving and handling) and are fully aware of best practice. Apparatus will be provided to assist with children who need special arrangements following assessment from physiotherapist/occupational therapist/manual handling advisor as required.

2.3 Staff will be supported to adapt their practice in relation to the needs of individual children taking into account developmental changes such as the onset of puberty and menstruation. Wherever possible staff who are involved in the intimate care of children/young people will not usually be involved with the delivery of sex and relationship education to their children/young people as an additional safeguard to both staff and children/young people involved.

2.4 There is careful communication with each child who needs help with intimate care in line with their preferred means of communication (verbal, symbolic, etc.) to discuss the child's needs and preferences. The child is aware of each procedure that is carried out and the reasons for it.

2.5 As a basic principle children will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each child to do as much for themselves as they can. This may mean, for example, giving the child responsibility for washing themselves. Individual intimate care plans will be drawn up for particular children as appropriate to suit the circumstances of the child. These plans include a full risk assessment to address issues such as moving and handling, personal safety of the child and the carer and health.

2.6 Each child's right to privacy will be respected. Careful consideration will be given to each child's situation to determine how many carers might need to be present when a child needs help with intimate care. Where possible one child will be cared for by one adult unless there is a sound reason for having two adults present. If this is the case, the reasons should be clearly documented.



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- 2.7 Wherever possible the same child will not be cared for by the same adult on a regular basis; there will be a rota of carers known to the child who will take turns in providing care. This will ensure, as far as possible, that over-familiar relationships are discouraged from developing, while at the same time guarding against the care being carried out by a succession of completely different carers.
- 2.8 Parents/carers will be involved with their child's intimate care arrangements on a regular basis; a clear account of the agreed arrangements will be recorded on the child's care plan. The needs and wishes of children and parents will be carefully considered alongside any possible constraints; e.g. staffing and equal opportunities legislation.
- 2.9 Each child/young person will have an assigned senior member of staff to act as an advocate to whom they will be able to communicate any issues or concerns that they may have about the quality of care they receive.

## **3.0 The protection of children**

- 3.1 Education Child Protection Procedures and Inter-Agency Child Protection procedures will be accessible to staff and adhered to.
- 3.2 Where appropriate, all children will be taught personal safety skills carefully matched to their level of development and understanding.
- 3.3 If a member of staff has any concerns about physical changes in a child's presentation, e.g. marks, bruises, soreness etc. s/he will immediately report concerns to the appropriate manager/ designated person for child protection, according to procedures laid out in the School's Child Protection Policy.
- 3.4 If a child becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be looked into and outcomes recorded. Parents/carers will be contacted at the earliest opportunity as part of this process in order to reach a resolution. Staffing schedules will be altered until the issue(s) are resolved so that the child's needs remain paramount. Further advice will be taken from outside agencies if necessary.
- 3.5 If a child makes an allegation against a member of staff, all procedures will be followed in accordance with the School's Disciplinary Policy

*\* where 'children' are mentioned in this document, the term will also include young people.*

*This policy of St Thomas of Canterbury School upholds the school's ethos and Mission Statement. It must be read in conjunction with and implemented in accordance to the school's policies for Health & Safety, Equal Opportunities, Inclusion and Safeguarding. Copies of these policies are available from the school website.*



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***This policy has been written in line with The Intimate Care and Toileting policy guidance 2014-15 on the Surrey County Council Website.***

## Appendix

**Forms to support care, to be used as required**

### **Form 1      Record of agencies involved:**

Child's name:

DOB:

Name / Role	Contact address/phone/email
Parent/carer	
GP	
School nurse/health visitor	
Continence advisor	
Home care team (Community Paediatric nurse)	
Physiotherapist	
Occupational therapist	
Hospital consultant	
Physical and Sensory Support Service	
Educational Psychologist	
Case Officer	
Social Worker	





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## Form 2 Personal Care Management Checklist

(To inform the written personal care management plan)

Child's Name

Facilities	Discussed	Action
<b>Suitable toilet identified?</b> <b>Adaptations required</b> <ul style="list-style-type: none"><li>• Changing mat with easy clean surface</li><li>• Electric rise and fall changing bed</li><li>• Electric hoist</li><li>• Manual hoist</li><li>• Grab rails</li><li>• Step</li><li>• Wheeled plastic toilet seat</li><li>• Plastic toilet seat</li><li>• Easy operate locks at suitable height</li><li>• Accessible locker / container for supplies</li><li>• Mirror at suitable height</li><li>• Hot and cold water lever taps</li><li>• Disposal unit</li><li>• Bleeper/emergency help</li></ul>		
<b>Supplies</b> <b>Provided by parent:</b> <ul style="list-style-type: none"><li>• Pads</li><li>• Catheters</li><li>• Wipes</li><li>• Spare clothes</li><li>• Others (specify)</li></ul> <b>Provided by School:</b> <ul style="list-style-type: none"><li>• Toilet rolls</li><li>• Urine bottles</li><li>• Bowl/bucket</li><li>• Antiseptic cleanser, cloths, blue roll</li><li>• Antiseptic hand wash</li><li>• Milton/sterilising fluid</li><li>• Paper towels</li><li>• Soap</li><li>• Disposable gloves</li></ul>		



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<ul style="list-style-type: none"><li>• Disposable aprons</li><li>• Yellow sacks/disposal bags</li></ul>		
<b>Staff training/communication:</b> <ul style="list-style-type: none"><li>• Advice sought from medical personnel</li><li>• Manual handling adviser</li><li>• Parental/carer involvement in the management plan</li><li>• Child's involvement in the management plan</li><li>• Parental/child's preference for gender of carer</li><li>• Specific training for staff in personal care role</li><li>• Awareness raising for all staff including PE staff</li></ul> <b>Other Children /pupils</b> <ul style="list-style-type: none"><li>• Consult child, respect privacy</li><li>• How does child communicate needs?</li></ul>		

<b>PE issues to enable access to all activities:</b> <ul style="list-style-type: none"><li>• Discreet clothing required</li><li>• Privacy for changing</li><li>• Specific advice required for swimming</li><li>• Specialist nurse</li><li>• Manual handling advisor</li></ul>		
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<b>Support</b> Identified staff  Back up staff  Training for staff  Time plan for supporting Personal Care need		
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## Form 3 Personal Care Management Plan

(Developed from the Personal Care Management Checklist)

Child's Name	DOB	Condition
Details of Assistance required:		
Facilities and equipment, clarifying responsibility for provision of supplies)		
Staffing Regular staff: Names (time plan attached)  Back Up Staff: Names		
Training Needs: ( signed and dated records to be kept by individual staff and school (In First Aid/Intimate care/ health file)		
Curriculum specific needs		
Arrangements for trips/transport		

Procedures for monitoring complaints: (Including notification of changing needs by any relevant party)

This current plan has been agreed by:

Name	Role	Signature	Date
Date for review:			







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## Form 4 Toileting Plan

### Record of Discussion with Parent /Carers

Child's Name	DOB	Date agreed
	Details	Action
<b>Working towards independence:</b> e.g. <ul style="list-style-type: none"> <li>taking to the toilet at timed intervals,</li> <li>using sign or symbol,</li> <li>rewards used</li> </ul>		
<b>Arrangements for Nappy / pad changing:</b> <ul style="list-style-type: none"> <li>who</li> <li>where</li> <li>arrangements for privacy</li> </ul>		
<b>Level of assistance</b> <ul style="list-style-type: none"> <li>undressing</li> <li>dressings</li> <li>hand washing</li> <li>talking / signing to child</li> </ul>		
<b>Infection Control</b> <ul style="list-style-type: none"> <li>disposable gloves</li> <li>nappy disposal</li> </ul>		
<b>Sharing Information:</b> <ul style="list-style-type: none"> <li>family customs / cultural practices</li> <li>what to do if the child has nappy rash or any marks</li> </ul>		
<b>Resources needed:</b> <ul style="list-style-type: none"> <li>special seat</li> <li>nappies</li> <li>pull-ups</li> <li>creams</li> <li>disposable sacks</li> <li>change of clothes</li> <li>toilet step</li> <li>gloves</li> <li></li> </ul>		
<b>Signed:</b> Parent Key member of staff:	<b>Review date:</b>	







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## **Form 6      Agreement of Intimate Care Procedures for a child with complex needs**

The purpose of this agreement to ensure that both parents/carers and professionals are in agreement with what care is given, who is providing the care and that appropriate training is given.

Teaching of the care procedure may be carried out by the parent/carer or by the professional experienced in that procedure.

When the parent/carer and/or professional are agreed the procedure has been learned and the staff carer feels comfortable with, and competent to administer that procedure this record should be signed by the parties. One copy should be given to the staff carer, one retained in the staff carer's personnel file and one filed in the child's medical health record.

**Child's Name:**

**Procedure**

**Staff carer's name:**

**Date**

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**Parent /Carer and /or professional**

**I have taught the above the procedure to the named staff carer and have assessed her/him as able to perform the care as instructed.**

**Signed**

**Date**

**Designation**

**Autumn term date reviewed**

**Spring term date reviewed**

**Summer term date reviewed**

