



Reaching our Potential Together in Christ

INTIMATE CARE KEYWORKER AND APPROPRIATE
CONTACT POLICY

Contents:

Statement of intent

1. Legal framework
2. Definitions
3. Health and safety
4. Staff and facilities
5. School responsibilities
6. Parental responsibilities
7. Safeguarding
8. Swimming
9. Offsite visits
10. Toilet training
11. Monitoring and review

Appendices

- a) Toilet Management Plan

ST MARY MAGDALEN'S CHURCH OF ENGLAND PRIMARY SCHOOL'S
VISION STATEMENT

'To live and live splendidly' John 10:10
By reaching our potential together in Christ.

We believe that through the teaching of God's word at St Mary Magdalen's Church of England Primary School, we prepare our children for all challenges that lie before them, enabling all our school family to, **'live and live splendidly' John 10:10 'By reaching our potential together in Christ.'** We endeavour to provide a rich soil, enabling our children to flourish socially, morally, and spiritually in a safe environment. We do this by being prayerful and accepting of God's word, following our Christian values where love is central to all we do **Galatians 5:22-23.** *It is our vision to inspire our children by creating a love of learning throughout our unique curriculum.* We worship by celebrating our uniqueness in the acceptance and respect all our differences whilst remembering our faith's diversities and spirituality. **John 13:34.**

Statement of intent

ST MARY MAGDALEN'S CHURCH OF ENGLAND PRIMARY SCHOOL takes the health and wellbeing of its pupils very seriously. As described in the Supporting Pupils with Medical Conditions Policy, the school aims to support pupils with physical disabilities and illnesses to enable them to have a full and rich academic life whilst at school.

The governing board recognises its duties and responsibilities in relation to the Equality Act 2010, which states that any pupil with an impairment affecting their ability to carry out normal day-to-day activities must not be discriminated against.

Pupils will always be treated with care, sensitivity and respect when intimate care is given, and no pupil will be left feeling embarrassed or as if they have created a problem.



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1. Legal framework

This policy has due regard to all relevant legislation and statutory guidance including, but not limited to, the following:

-  Children and Families Act 2014
-  Education Act 2011
-  Health Act 2006
-  Equality Act 2010
-  DfE (2024) 'Keeping children safe in education'

This policy operates in conjunction with the following school policies:

-  Health and Safety Policy
-  Supporting Pupils with Medical Conditions Policy
-  First Aid Policy
-  Child Protection and Safeguarding Policy
-  Staff Code of Conduct
-  Whistleblowing Policy
-  Administering Medication Policy

2. Definitions

For the purpose of this policy, **intimate care** is defined as any care which may involve the following:

-  Washing
-  Touching
-  Carrying out an invasive procedure
-  Changing a child who has soiled themselves
-  Providing oral care
-  Feeding
-  Assisting in toilet issues
-  Providing comfort to an upset or distressed pupil

Intimate care tasks are associated with bodily functions, body products and personal hygiene that demand direct or indirect contact with, or exposure of, the genitals.



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Examples of intimate care include support with dressing and undressing (underwear), changing incontinence pads, nappies or medical bags such as colostomy bags, menstrual hygiene, helping someone use the toilet, or washing intimate parts of the body.

Pupils may be unable to meet their own care needs for a variety of reasons and will require regular support.

3. Health and safety

The Health and Safety Policy lays out specific requirements for cleaning and hygiene, including how to deal with spillages, vomit and other bodily fluids.

Any member of staff that is required to assist a pupil with changing a medical bag will be trained to do so and will carry out the procedure in accordance with the Supporting Pupils with Medical Conditions Policy.

Staff will wear disposable aprons and gloves while assisting a pupil in the toilet or while changing a nappy, incontinence pad or medical bag.

Soiled nappies, incontinence pads and medical bags will be securely wrapped and disposed of appropriately.

Where one pupil requires intimate care or toileting support, nappies, incontinence pads and medical bags will be disposed of in an ordinary bin, as per health and safety guidelines.

Where more than one pupil requires intimate care, nappies, incontinence pads and medical bags will be disposed as follows:



In the bins provided

The changing area or toilet will be left clean. Hot water and soap will be available to wash hands. Paper towels will be available to dry hands.

4. Staff and facilities

Staff members who provide intimate care will be suitably trained, and will be made aware of what is considered good practice.

Staff will only be required to administer intimate care if it is listed in their job description or contract of employment.

Suitable equipment and facilities will be provided to assist pupils who need special arrangements following assessment from a physiotherapist or occupational therapist. This may include the following:



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-  Changing mat
-  Non-slip step
-  Adapted toilet seat or commode seat
-  Disposable gloves/aprons
-  Nappies, pads and medical bags
-  Tissue rolls (for changing mat/cleansing)
-  Supply of hot water
-  Soap
-  Barrier creams
-  Antiseptic cleanser for staff
-  Antiseptic cleanser for the changing bed/mat
-  Clinical waste bag

The school has two extended disabled toilet facilities with a washbasin which include three changing areas.

Mobile pupils will be changed while standing up. Pupils who are not mobile will be changed on a purpose-built changing bed or changing mat on the floor.

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 or menstruation.

5. School responsibilities

Arrangements will be made with a multi-agency to discuss the personal care needs of any pupil prior to them attending the school.

Where possible, pupils who require intimate care will be involved in planning for their own healthcare needs wherever possible, with input from parents welcomed.

In liaison with the pupil and parents, an individual intimate care plan will be created to ensure that reasonable adjustments are made for any pupil with a health condition or disability.

Regular consultations will be arranged with all parents and pupils regarding toilet facilities.

The privacy and dignity of any pupil who requires intimate care will be respected at all times. A qualified member of staff will change the pupil, or assist them in changing themselves if they become wet, or soil themselves. Any pupil with wet or soiled clothing will be assisted in cleaning themselves and will be given spare clothing, nappies, pads, etc., as provided by the parents.



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Members of staff will react to accidents in a calm and sympathetic manner. Accurate records of times, staff, and any other details of incidents of intimate care will be kept in a Record of Intimate Care Intervention, and they will be stored in the nurse's office.

Arrangements will be made for how often the pupil should be routinely changed if the pupil is in school for a full day, and the pupil will be changed by a designated member of staff. A minimum number of changes will be agreed.

The family's cultural practices will always be taken into account for cases of intimate care. Where possible, only same-sex intimate care will be carried out.

Parents will be contacted if the pupil refuses to be changed, or becomes distressed during the process.

Excellent standards of hygiene will be maintained at all times when carrying out intimate care.

6. Parental responsibilities

Parents will change their child, or assist them in going to the toilet, at the latest possible time before coming to school.

Parents will provide spare nappies, incontinence pads, medical bags, wet wipes and a change of clothing in case of accidents.

A copy of this policy will be read and signed by parents to ensure that they understand the policies and procedures surrounding intimate care.

Parents will inform the school should their child have any marks or rashes.

Parents will come to an agreement with staff in determining how often their child will need to be changed, and who will do the changing.

7. Safeguarding

Staff members working directly with children will receive safeguarding training as part of their mandatory induction, in line with the Child Protection and Safeguarding Policy.

Intimate care is a regulated activity; therefore, only members of staff who have an enhanced DBS certificate with a barred list check are permitted to undertake intimate care duties.

Wherever possible, staff involved in intimate care will not be involved in the delivery of sex education to the pupils in their care as an extra safeguard to both staff and pupils involved.



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Individual intimate care plans will be drawn up for pupils as appropriate to suit the circumstances of the pupil.

Each pupil's right to privacy will be respected. Careful consideration will be given to each pupil's situation to determine how many carers will need to be present when the pupil requires intimate care.

If any member of staff has concerns about physical changes to a pupil's presentation, such as marks or bruises, they will report the concerns to the [DSL](#) immediately.

Special consideration will be taken to ensure that bullying and teasing does not occur.

8. Swimming

Pupils in Years [2](#) to [6](#) regularly participate in swimming lessons at [Accrington Academy](#); during these lessons, pupils are entitled to privacy when changing; however, some pupils will need to be supervised during changing.

Parental consent will be obtained before assisting any pupils in changing clothing before and after swimming lessons.

Details of any additional arrangements will be recorded in the pupil's individual intimate care plan.

9. Offsite visits

Before offsite visits, including residential trips, the pupil's individual intimate plan will be amended to include procedures for intimate care whilst off the school premises.

Staff will apply all the procedures described in this policy during residential and off-site visits.

Meetings with pupils away from the school premises, where a chaperone is not present, will not be permitted, unless approval has been obtained by the headteacher.

Consent from a parent will be obtained and recorded prior to any offsite visit.

10. Toilet training

Members of staff providing care will inform another member of staff prior to taking a pupil to be changed or to use the toilet.

Where potties are used, they will be emptied immediately and cleaned with an anti-bacterial spray. The potty or toilet is checked to assess whether it is clean before use and toilet paper is well stocked.



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Gloves and aprons will be worn before each change and the area should be prepared to ensure it is clean and suitable for use. Gloves must be worn at all times when changing nappies, and during any instances where the member of staff could come into contact with bodily fluids.

All pupils will be accompanied to the toilet and will be appropriately supervised and supported during the toilet training stage. Staff will be sensitive and sympathetic when changing pupils and will not make negative facial expressions or negative comments. Pupils' efforts will be reinforced by praise where appropriate.

Staff are required to ensure that soiled/wet nappies are changed as soon as possible. Where pupils are left in soiled nappies and/or clothes, this will be dealt with in line with the school's Disciplinary Policy and Procedure.

Pupils will be encouraged to wash their hands with soap and warm water, with assistance provided where necessary.

If a pupil has a toileting accident, they will be offered assistance to change or be changed by a member of staff regardless of their age.

To build independence, pupils will be encouraged to replace their own clothes and flush the toilet, if they are capable of doing so.

Parents are consulted on the approach to toilet training their pupil to ensure there is consistency with the approach at home. Pupils' progress is discussed at handover with parents. If any pupil is struggling with toilet training techniques or has any issues, e.g. a rash, this will be discussed with the headteacher and the pupil's parents.

At St Mary Magdalen's CE Primary School each child has their own personal key worker. A key worker is a member of staff who have special responsibility for the education and welfare of a particular group of children during their time in reception. A key worker will ensure that the needs of the child are recognised within the overall curriculum framework of the group.

The primary aim of the key worker system is to promote close relationships between the practitioner and his/her children in order to meet their emotional needs. Parents/carers have equal opportunity and access to their child's key worker and would have had an informal meeting prior to their child's first day. A key worker will help your child to become familiar with St Mary Magdalen's CE Primary School and to feel confident and safe within it. They will also talk to parents/carers to make sure that the needs of the child are being met appropriately, and that records of development and progress are shared with parents/carers and other professionals as necessary.



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Physical Contact

Because of the nature of the children in our care, their age maturity and backgrounds, we endeavour to support children in a variety of different ways. We wish to help children feel wanted and valued at all times in the school.

Many of our children either do not understand or are still learning to understand the appropriateness of physical contact. Children look to us for approval and are testing out responses all the time.

It is often appropriate for children to be given some physical contact and comfort, but this must always be offered with the following caution: Hand shakes

-  Side hugs
-  Linked arms

Holding hands during playtimes or outings

1. Always ensure there are other adults or responsible children around.
2. Never show favour to individual children.
3. Never touch a child in the area between the waist and mid-thigh or near the chest. **
4. Never touch a child in a way that could be mis-interpreted as being anything other than friendly appropriate adult-child support.
5. Where a child tries to get closer than appropriate, the message should always be along the lines of, "I like you and I enjoy being with you, but I would rather you held my arm/hand like this".
6. Some very active children sometimes calm down and focus on a lesson when having a gentle stroke e.g. on the back of the neck. In this case such a support mechanism must be written into the child's Care Plan.
7. Cuddles should be short and side by side.
8. Never kiss a child, and do not encourage children to kiss adult's other than their parents.
9. A child should only sit on an adult's knee for a **short time and for a specific reason such as following an injury, and not too close to the body**. If a child may need to sit on a member of staff's knee for longer term support, this must be written into the child's Care Plan.
10. Tickling is not appropriate.
11. For children within Foundation Stage, appropriate relationships are still being established, and there is a greater need for a more nurturing environment where it may be more appropriate for closer physical contact during some activities. The above cautions still apply, except that



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sitting on a knee, or longer cuddles may be more acceptable until the child is established and confident in school.

12. Where children require help with changing or toileting, the dignity of the child must be maintained at all times. Great care must be taken to ensure that all physical contact is specifically and only for the purpose of the operation being carried out.

****Exceptions would be made in a physical Intervention using only Positive Handling approaches.**

Appropriate touches include:

-  Guiding children using "Caring Hands"
-  Positive Handling approaches for trained staff only

Children's Response to Touch

Staff must always be aware that all children interpret and react to touch in different ways. Some children are over-demonstrative and try to demand a great deal of affection and physical contact, whilst others shy away from or have a dislike of physical contact. We must never assume that a child will accept a touch that is meant as a friendly gesture.

There may be children in our care who have backgrounds where there has been inappropriate physical contact, or even emotional, physical or sexual abuse. These children will be confused about adult-child contact and will need very sensitive support and care. Wherever there is physical contact, this must be seriously considered.

11. Monitoring and review

This policy is reviewed every [two years](#) by the [headteacher](#) and the [DSL](#).

All changes are communicated to relevant stakeholders.

The scheduled review date for this policy is [SEPTEMBER 2027](#).



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