Clybiau Llywodraethwyr a Chylch Chwarae
Gresffordd Gresford
Governors' Clubs and Playgroup

Intimate Care Policy

Equality Act Impact Assessment	YES	NO	Ionawr 2025
Last Review Date	May 2026		
Date to be reviewed	May 2027		
Date Adopted by Management Committee	10.06.2026		
Responsible Individual - Mr Richard Hatwood			
Chair of Management Committee – Mrs Jan MacDonald			

Introduction

Intimate care can be defined as any care which involves washing or carrying out a procedure to intimate personal areas which most people usually carry out themselves but some children are unable to do because of their age, physical difficulties, disabilities or other Additional Learning Need such as developmental delay. 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. Examples can include support with dressing and undressing (underwear), changing of incontinence pads and nappies, helping an individual use the toilet, or washing intimate parts of the body. Intimate care can be undertaken on a regular basis or during a one-off incident. Specialist support will be required with needs such as the use of catheterisation and colostomy bags. Guidance on these medical interventions should be sought from relevant Health Service professionals and included in the child's Individual Healthcare Plan (IHP).

With an increase in recent years in the number of three year olds starting in school who are not toilet trained, the greater the need for clear procedures for providing intimate care and defined roles. In some case there may be a lack of training or a developmental delay, however, other children may have an underlying medical need. In either case, it is not permissible to refuse a child admission to school on the basis that the child is not toilet trained or to request that a parent/carer attends school to change their child.

Context
The Welsh Government issued 'Supporting Learners with Healthcare Needs' Guidance for schools and other educational settings in March 2017. Whilst aimed at educational settings, the principles and approaches are relevant to our childcare setting.

Many children have a short-term healthcare need at some point, which may affect their participation in educational or play activities. Others may have significant or long-term healthcare needs affecting their cognitive or physical abilities, their behaviour or emotional needs. The Welsh Government guidance emphasises the need for a collaborative approach from education and health professionals, placing he child at the centre of decision making. The guidance states that:
'The education setting should have an intimate care policy. It should be followed, unless alternative arrangements have been agreed, and recorded in the learner's Individual Healthcare Plan'.

Gresford Governors' Club and Playgroup will act in accordance with Welsh Government Guidance 'Supporting Learners with Healthcare Needs' (2017) alongside 'Keeping Learners Safe' (2015) and the All Wales Child Protection Procedures (2008) to safeguard and promote the welfare of all children and staff.

We also recognise our duties and responsibilities in relation to the Equalities Act (2010) and the need to treat all learners, regardless of their age, gender, disability, religion, ethnicity or sexual orientation with respect and dignity when intimate care is given.

In order to meet these responsibilities under the Equality Act 2010, our setting must make 'reasonable adjustments' to accommodate children with disabilities, which may include the provision of personal and intimate care. The welfare of the children is of paramount importance and their experience of intimate and personal care should be a positive one.

Related Policies
This Intimate Care Policy should be read in conjunction with the following policies:
- Safeguarding & Child Protection Policy
- Health and Safety Policy – including Manual Handling
- Additional Learning Needs Policy
- Staff Code of Conduct

Key Principles
The following are the fundamental principles upon which this policy is based:
- every child has the right to be safe
- every child has the right to personal privacy
- every child has the right to be valued as an individual
- every child has the right to be treated with dignity and respect
- all children have the right to be involved and consulted in their own intimate care to the best of their abilities
- all children have the right to express their views on their own intimate care and to have such views taken into account; and

- every child has the right to have levels of intimate care that are appropriate and consistent.

Roles and Responsibilities – Responsible Individual & Early Years Manager
The staff at Gresford Governors' Club and Playgroup who provide intimate care, are in a position of great trust and responsibility and the importance of their role in promoting personal development of learners is invaluable. The Early Years Manger / Responsible Individual will ensure that any adults assisting with intimate care will be employees of the setting and the child will be supported to achieve the highest level of autonomy that is possible given their age and ability.

Where intimate care is not detailed in a Job Description, then only staff members who have indicated a willingness to do so, should be required to provide intimate care. The Early Years Manger / Responsible Individual will ensure that all staff will be appropriately trained and supported. Only those members of staff who are familiar with the Intimate Care Policy and other pastoral care policies of setting are to be involved in the intimate care of learners.

Roles and Responsibilities – Setting Staff
It is the responsibility of all staff caring for a child to ensure that they are aware of their method and level of communication. Depending on their maturity and levels of stress children may communicate using different methods - words, signs, symbols, body movements, eye pointing, etc.

Staff attitude to a child's intimate care is also important. Keeping in mind their age, the routine care should be both efficient and relaxed. To ensure effective communication, staff will:

- make eye contact at the child's level (Dependent on any Additional Learning Needs),
- use simple language and repeat if necessary,
- wait for response,
- continue to explain to the child what is happening even if there is no response;
- treat the child as an individual with dignity and respect.

Staff will encourage each child to do as much for themself as they are able to. This may mean, for example, giving the child the responsibility for washing themselves. Where a situation renders a child fully dependent; the member of staff should talk about what is going to be done and provide choices where possible. The member of staff should ensure they are aware of any preferences for the intimate care from the child and/or parent/carer.
Young children and those with Additional Learning Needs (ALN) can be especially vulnerable. Staff involved with their intimate care need to be particularly sensitive to their individual needs.

Some procedures must only be carried out by members of staff who have been formally trained and assessed. There should be more than one member of staff assigned within a plan to allow for any illness absence or leave.

Only in the event of an emergency would staff undertake any aspect of intimate care that has not been agreed by parents/carers and setting. Parents or Carers would then be contacted immediately.

Roles and Responsibilities – Parents & Carers
Parents and carers have a responsibility to advise the setting of any known intimate care needs relating to their child. The setting will ensure that there is an effective transition system in place between the setting and any other provider, and that parents/carers are given the opportunity to discuss any intimate care needs during planned admissions meetings.

Parents and carers will work in partnership with setting staff and other professionals to share information and provide continuity of care. They are required to provide changes of clothes , wipes and nappies on a daily basis.

Child Protection & Safeguarding
It is essential that the Early Years Manger / Responsible Individual ensures all staff are familiar with the Safeguarding & Child Protection Policy and Procedures, and if there are any concerns, they should be recorded and discussed with the setting Designated Person for Child Protection; Richard Hatwood (Responsible Individual), Sarah Parker (Early Years Manager) or in their absence Shannon Williams – Strategic Childcare Manager.

The number of staff required to undertake procedures will depend upon individual circumstances and should be discussed with all concerned with the learner's privacy and dignity at the forefront. Knowledge of the child should be used to help assess the risk; a Risk Assessment should determine if one or two members of staff

(or more) are required. Where there are concerns around child protection, previous allegations, or moving and handling issues, it would be appropriate for a minimum of two adults to provide care.

If a member of staff has any concerns about physical changes in a child's presentation, e.g. marks, bruises, soreness etc, they will immediately report concerns to the Designated Person for Child Protection.

If a staff member has concerns about a colleague's intimate care practice, they must report this to the Designated Person for Child Protection immediately. If a staff member is accidentally hurt, they should report the incident to their manager immediately, seek medical assistance if needed and ensure an accurate record is recorded.

Ideally, every child should have the choice for intimate care but the current ratio of female to male staff in many settings, means that assistance will more often be given by a female.

As stated in 'Supporting learners with healthcare Needs (2017) 'certain medical procedures may require administration by an adult of the same gender as the learner, and may need to be witnessed by a second adult. The learner's thoughts and feelings regarding the number and gender of those assisting must be considered when providing intimate care. There is no requirement in law for there to be more than one person assisting. This should be agreed and reflected in the Individual Healthcare Plan (IHP) and risk assessment'.

If a child becomes distressed or unhappy about being cared for by a particular member of staff, parents / carers will be contacted at the earliest opportunity in order to reach a resolution and outcomes recorded. Staffing schedules may be altered until the issue(s) are resolved. Further advice will be taken from outside agencies if necessary.

If a child is accidentally hurt during the intimate care or misunderstands or misinterprets something, staff should reassure the child's safety and report the incident immediately to the Designated Person for Child Protection. Staff will also report and record any unusual emotional or behavioural response by the learner.

If a child or parent / carer makes an allegation against a member of staff, the setting's Designated Person for Child Protection must be informed and procedure must be followed in line with the setting Safeguarding and Child Protection Policy.

A written record of concerns must be made available to parents/carers and kept in the child's personal file. Further advice will be taken from outside agencies as necessary.

Disabled children are particularly vulnerable to abuse and discrimination because:

- They often have less control over their lives than their peers
- They may have multiple carers through residential, foster or hospital placements
- Changes in appearance, mood or behaviour may be attributed to the child's disability rather than abuse.
- They may not be able to communicate what is happening to them
- They do not always receive appropriate sex and relationships education, or if they do may not understand it, so are less able to recognise abuse.

It is vitally important that all staff members are familiar with the setting's Child Protection and Safeguarding Policy and Procedures. It is unrealistic to eliminate all risk, but the vulnerability places an important responsibility on staff to work in accordance with agreed procedures.

Environment
The setting has a fully accessible changing area, as required on admittance of a child with intimate care needs.

Our setting will identify a suitable changing area for children with healthcare needs, to enable their privacy to be maintained and to provide sufficient staff to safeguard the child.

In addition the setting will also consider:

- The availability of hot and cold running water
- Nappy disposal bags
- Supplies of nappies (provided by parents/carers)
- Wipes and cleaning cloths
- Labelled bins for the disposal nappies. (Soiled items should be double-bagged.)

- Special arrangements for the disposal of any contaminated or clinical materials including sharps and catheters
- Supplies of suitable cleaning materials - anti-bacterial sprays and hand wash
- Appropriate clean clothing (preferably the child's own)
- Effective staff alert system for help in an emergency
- Arrangements for menstruation when working with adolescent girls

Personal Protective Equipment (PPE)
Gresford Governors' Club and Playgroup is responsible for providing Personal Protective Equipment (PPE) which should include: Nitrile disposable gloves, disposable aprons, bin and liners to dispose of waste. Staff should always wear PPE when dealing with any child who is bleeding, wet or when changing a soiled nappy / clothing. Within our setting, red aprons are worn when providing intimate care. (To differentiate from cooking/food preparation during which green aprons are worn).

Waste Disposal
Gresford Governors' Club and Playgroup is responsible for the disposal of all nappies and other sanitary products used by children and staff on their premises. It would not be appropriate for the setting to send used nappies / pads home at the end of the session.

Parents and carers should provide a clean change of clothing, nappies, disposal bags, wipes etc. and they must be made aware of this responsibility. Disposal of soiled nappies / pads / clothing should be discussed during any admission meetings and noted on the Individual Healthcare Plan. (If appropriate). Specialist provision / equipment i.e. catheterisation / diabetes / menstrual management / or any other intimate healthcare needs should be disposed of as agreed in the child's Individual Healthcare Plan.

Record Keeping
Where it is identified that intimate care will be required for a child, an agreement between parents and carers and the setting will be completed. This agreement will detail what care is to be provided and by whom. It is vital that this is prepared prior to admission, and where possible opportunities are made for the pupil and family to meet the staff who will be providing intimate care.

Whole setting management considerations should be taken into account, for example:

- The importance of working towards independence
- Substitutes in case of staff absence
- Strategies for dealing with bullying/harassment (if the child has an odour for example)
- Seating arrangements in class (ease of exit)
- A system to leave the setting with minimum disruption
- Awareness of discomfort that may disrupt engagement

For each use of intimate care, staff will record using the Personal Care Intervention Log.

Where there are particular difficulties which might indicate a need for the intimate care to be delivered by two members of staff; a risk assessment must be completed and retained on the learner's record e.g. manual handling, safeguarding issues.

Complaints Procedure
If a child, parent or carer is not satisfied with Gresford Governors' Club and Playgroup intimate or healthcare arrangements, they are entitled to make a complaint. Please refer to the Complaints Procedure / Policy for further information. The policy can be found on our website and is available from setting staff.

Insurance
Gresford Governors' Club and Playgroup have all relevant insurances, from Employer's Liability to Personal Liability Insurance.

Monitoring
Intimate Care agreements must be reviewed on a regular basis according to the developing needs of the child. This should take place at least on a termly basis with all relevant parties to consider future arrangements.

References
Welsh Government: Statutory Guidance: Supporting Learners with Healthcare Needs. Guidance. Welsh Government 215/2017.
http://learning.gov.wales/resources/browse-all/supporting-learners-with-healthcare-needs/?lang=en

Public Health Wales: All Wales Guidance Infection Prevention and Control for Childcare Settings (0-5 years) Nurseries Child Minders and Playgroups (2014)

http://www.wales.nhs.uk/sitesplus/documents/888/Infection%20Prevention%20and%20Control%20for%20Childcare%20Settings%20Final%202014%20%282%29.output.pdf

Public Health Wales: All Wales Infection Prevention and Control Guidance for Education Settings (2017)

http://www.wales.nhs.uk/sitesplus/documents/888/All%20Wales%20Infection%20Prevention%20and%20Control%20Guidance%20for%20Educational%20Settings_FINALMay%202017x.pdf

School toilets: Good practice guidance for schools in Wales. Guidance document No: 053/2011 Date of issue: January 2012
https://gov.wales/topics/educationandskills/publications/guidance/schooltoilets/?lang=en

Flintshire County Borough Council Intimate Care Policy

Ceredigion County Borough Council: Intimate Care Guidance for Schools and Resourced Centres - September 2016