

CHILD PROTECTION AND SAFEGUARDING - INTIMATE CARE

Policy applies from EYFS to Sixth Form and to all Staff	
Date policy updated:	01.09.2024
Date policy to be reviewed:	01.09.2025 or earlier to reflect any changes in legislation
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09.22 v1	01.09.2022	N/a	No material changes.	Mr Luke Goodman
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Clifton High School is committed to child protection and safeguarding children and young people and expects all staff, visitors and volunteers to share this commitment.

Related Policies

Child Protection and Safeguarding

Early Years Foundation Stage (EYFS) Toileting Procedure

1. Introduction

Intimate care involves carrying out “*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*”.

At Clifton High School, the School Nurses, teachers, and teaching assistants may undertake intimate care, such as nappy changing and cleaning a pupil after soiling or wetting themselves. These members of staff may also support pupils with medical conditions of an intimate nature.

The purpose of this policy is to ensure that:

- pupils who receive intimate care are treated with dignity; and
- child protection safeguarding guidance is followed at all times.

2. Dignity of pupils

All pupils who require intimate care are always treated respectfully; the pupil’s welfare and dignity are of paramount importance. The School will do the following to ensure the dignity of pupils who receive intimate care:

- Each member of staff who provides intimate care receives **practical training** and follows best practice. Members of staff working in the Early Years Foundation Stage will follow the School’s EYFS Toileting Procedure.
- Members of staff will be supported to **adapt their practice** in relation to the needs of individual pupils considering developmental changes such as the onset of puberty and menstruation.

- Pupils will be supported to achieve the **highest level of autonomy** that is possible given their age and abilities. Members of staff will encourage each pupil to do as much for themselves as they can. This may mean, for example, giving the pupil responsibility for washing themselves.
- Members of staff **communicate carefully** with each pupil who needs help with intimate care in line with their preferred means of communication (verbal, symbolic, etc.) to discuss the pupil's needs and preferences. The pupil is aware of each procedure that is carried out and the reasons for it.
- Each pupil's **right to privacy** will be respected. Where possible, one pupil will be cared for by one adult, unless there is a sound reason for having two adults present, although other staff may be aware that it is taking place on a need-to-know basis.
- If necessary, **individual intimate care plans** will be drawn up for pupils. These plans will include a full risk assessment to address issues such as moving and handling and the personal safety of the pupil.
- **Parents will be involved** with their child's intimate care arrangements on a regular basis and a clear account of the agreed arrangements will be recorded on the pupil's care plan, where applicable. The needs and wishes of pupils and parents will be carefully considered alongside any possible constraints e.g. staffing and the Equality Act.
- Each pupil will have an **assigned member of staff**, usually their Class Teacher or Tutor, with whom they will be able to talk about any issues or concerns that they may have about the care they receive.

3. Child protection and safeguarding

Each member of staff who provides intimate care receives additional child protection and safeguarding training relevant to this aspect of their role.

All pupils are taught a full personal safety curriculum (appropriate to their developmental level and degree of understanding), as part of Personal, Social Health and Economic Education (PSHE), which includes personal safety skills. The curriculum is shared with parents who are encouraged to reinforce the personal safety messages within the home.

If a member of staff has any concerns about physical changes in a pupil's presentation, e.g. marks, bruises, soreness etc. they will immediately report concerns to the DSL or DDSLs who will then ensure that the pupil is seen by a School Nurse. A clear written record of the marks, bruises, soreness etc. will be recorded on CPOMS. The location of the marks, bruises, soreness etc. will also be recorded, using the body map facility within CPOMS. A referral will be made to Children's Social Care if necessary. Parents will be asked for their consent or informed that a referral is necessary prior to it being made unless doing so is likely to place the pupil at greater risk of harm. *Refer to the Child Protection and Safeguarding Policy.*



If a pupil becomes distressed or unhappy about being cared for by a member of staff, the matter will be reported to [the DSL who will investigate it and decide what steps should be taken (and will record the decision made on CPOMS). Parents will be contacted at the earliest opportunity as part of this process.

If a pupil makes an allegation against a member of staff, all necessary procedures must be followed. Refer to the Allegations section of the Child Protection and Safeguarding Policy.

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