

MANEA PRESCHOOL

Intimate Care policy

Introduction

Manea Pre-School, is committed to ensuring that all staff responsible for the intimate care of children or young people will undertake their duties in a professional manner at all times. We recognise that there is a need to treat all children/young people with respect and dignity when intimate care is given.

What is Intimate Care?

Intimate care encompasses areas of personal care, such as nappy/pads changing, washing and dressing.

Our approach to best practice:

Support for children/young people with intimate care needs will be carefully planned and should be a positive experience for all involved.

The setting will ensure that:

- Staff who provide intimate care are appropriately trained to meet the needs of individual children.
- All staff adhere to the setting's safeguarding and child protection policy and related procedures.
- Staff should always maintain appropriate professional boundaries and avoid behaviour which might be misinterpreted by others. They should report and record any incident with this potential.
- The setting will consider the appropriateness of any areas of the setting which may place staff or children in vulnerable situations and alternative areas will be strongly considered. This includes situations where staff carry out intimate care procedures in an unsupervised and/or isolated areas.
- Mobile phones, cameras and technological devices are not used by children or staff in areas where intimate care is carried out.
- Staff carrying out intimate care are appropriately supported and known to the child.
- Staff should be aware of their own limitations, only carrying out procedures they understand and feel competent and confident to carry out, if in doubt staff should ask.
- Suitable equipment and hygienic changing facilities are made available.
- Every intimate care procedure will be completed within an atmosphere of total respect and dignity both for the individual receiving care and for the person involved in giving the care.
- The number of adults engaged in the care should only reflect the minimum needed to perform the task safely and respectfully. Each situation should reflect both the safety and vulnerability of children/young people and staff.

- Intimate care is discussed and agreed with parents and carers beforehand.
- The needs and wishes of the child/young person are taken into consideration.
- An appropriate written plan for intimate personal care is discussed, agreed and shared with the child or young person and their family, signed by all involved and reviewed on a regular basis.
- Every plan supporting intimate care must demonstrate how the child/young person can be enabled to develop their independence as far as is reasonably practical.
- Staff should ensure that the child or young person's privacy is considered and balanced with safeguarding and support needs when changing nappies and toileting. Privacy and modesty are respected and protected at all times.
- Staff should speak to the child personally by name so that they are aware of being the focus of the activity and seek their consent, where possible, to the intimate care about to take place.
- Staff must always communicate in an age-appropriate way taking into account the child's developmental level and preferred communication method.
- Staff should enable the child to be prepared for or anticipate events while demonstrating respect for her/his body, e.g. by giving a strong sensory or verbal cue such as using a sponge or pad to signal intention to wash or change.
- Staff should have knowledge and understanding of any religious and cultural sensitivities related to aspects of intimate care and take these fully into account.
- Staff should agree with the child and their family appropriate terminology for private parts of the body and functions. Best practice in personal safety work would be to use the correct anatomical names for intimate body parts.
- Intimate care is logged and recorded and records retained. The record will include the date and time the intimate care was carried out and by whom.
- Staff should keep records where relevant, of a child's responses to intimate care and any changes in behaviour.
- The setting has procedures and plans in place for the day-to-day intimate care needs of a child or young person, but further consideration and risk assessment will need to be taken in good time before a trip, outing or activity.
- Equal opportunities legislation is taken into account.

Intimate care - Safeguarding Children

If a member of staff has any concerns about physical or behavioural changes in a child/young person's presentation, e.g. marks, bruises, soreness, becoming watchful and wary, freezing, gaze aversion, they will immediately log and pass their concerns to the Designated Safeguarding Lead in their setting.

Children and young people are entitled to respect and privacy at all times and especially when in a state of undress, changing clothes, bathing or undertaking any form of personal care. An appropriate level of supervision to safeguard children and young people and/or to satisfy health and safety considerations will be implemented. This supervision should be appropriate to the needs and age of the child or young person concerned and sensitive to the potential for embarrassment.

Research has shown that whilst all children are vulnerable to abuse, young children and children and young people with disabilities are especially vulnerable. It is important to remember that some individuals may choose this line of work to gain access to vulnerable children in order to abuse them. One to one situations have the potential to make children/young people more

vulnerable to harm by those who seek to exploit their position of trust. Adults working in one-to-one situations with children/young people may also be more vulnerable to unjust or unfounded allegations being made against them. Both possibilities should be recognised so that when one to one situations happen, reasonable and sensible precautions are taken. Every attempt should be made to ensure the safety and security of children and young people and the adults who work with them.

The setting will ensure that intimate care practices including risk assessments, are reviewed at least annually and staff are supported with their implementation and understanding of these. Adults will be encouraged to be vigilant about their own behaviour at all times, ensuring they strictly follow agreed procedures and be mindful of the needs of the children and young people with whom they care for. In the event of an allegation being made against a member of staff, volunteer or student, the procedures for an Allegation of Abuse (as per the guidance and flow chart) will be followed.

Part of creating a protective ethos in settings involve raising awareness among staff and children as appropriate about the process of targeting and grooming used by sex offenders.

Targeting is the process offenders use to identify a victim. Children most likely to be targeted are those in groups identified as 'vulnerable'. They may fall into one or some of these categories: children with troubled or unsettled lives; with identified behavioural or emotional problems; who are separated from parents; who are known to have been previously abused; who are insecure with low self-esteem; who are isolated, socially or geographically; with disabilities or SEN

Grooming is the process by which an offender manipulates the environment to increase the likelihood of offending without being caught. Some areas to consider in relation to grooming are:

- It involves adults and children.
- The more protective adults a child has in their network the less likely they will be successfully targeted.
- It is subtle and it may be carried out in such a way as to have an 'innocent' explanation.
- It is manipulative and deliberate
- It may be seen as warmth and helpfulness making the person extremely plausible
- It can be a slow process
- Children become entrapped and feel responsible and guilty
- Children are coerced to keep secrets.

Staff need to know that if they have concerns about the behaviour of a member of staff or volunteer within the setting they must report their concerns immediately to the Manager or DP. If the concerns are about the Manager or DSL they should speak immediately to the owner or committee chair.

Whistle blowing
Whistle blowing is the mechanism by which adults can voice their concerns, made in good faith, without fear of repercussion. Staff and volunteers who use the setting Whistle Blowing Policy should be made aware that their employment rights are protected.

Staff and volunteers should acknowledge their individual responsibilities to bring matters of concern to the attention of senior management and/or relevant external agencies. This is particularly important where the welfare of children may be at risk.

Visits and outings

The setting has robust procedures and plans in place for the day-to-day intimate care needs of a child or young person, but further consideration will need to be taken in good time before a trip or for an activity.

Useful contacts

Early Years' Service	earlyyears.service@cambridgeshire.gov.uk
Guidance for Safer Working Practice for those working with children and young people in education settings, Safer Recruitment Consortium, February 2022	Particularly: Part 13: Physical contact (page12) Part 14: Other activities that require physical contact-Intimate care (pages 14-15) Part 15: Intimate/Personal care
Early Years Foundation Stage statutory framework September 2025	Section 3.86; Toilets and intimate hygiene