

# East Midlands Academy Trust

## Intimate Care Policy 2023/2024

**'Every child deserves to be the best they can be'**

Scope: East Midlands Academy Trust & Academies within the Trust	
<b>Version: V1</b>	<b>Filename:</b> EMAT Intimate Care Policy
<b>Approval:</b> <i>Approved by the Trust Board</i>	<b>Next Review:</b> <i>This Policy will be reviewed by the Trust Board (S&amp;P committee) annually</i>
<b>Owner:</b> East Midlands Academy Trust Board of Trustees	<b>Union Status:</b> Not Applicable

Policy type:	
Non-Statutory	Replaces Academy's current policy

## EMAT Intimate Care Policy

*“Intimate care is care which involves contact with parts of the body that we usually consider to be private.”*

*Barnado’s Carers’ Handbook.*

East Midlands Academy Trust and Castle Academy are committed to ensuring that all staff responsible for the intimate care of children will undertake their duties in a professional manner at all times. We recognise the 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. The child’s welfare and dignity is of paramount importance. Every child’s right to privacy will be respected.

This policy should be read alongside the publication *“Guidance on the provision of intimate care to children and young people at school”* from the Education Authority

### Rationale

The purpose of these procedures is to set out guidelines that safeguard children and staff by providing a consistent approach. Staff providing personal care must be aware of the need to adhere to good Child Protection practice in order to minimise the risks for both children and staff. We recognise that the needs of our pupils will change throughout their journey in school but their rights will remain the same.

### Aims

The aims of the policy and procedures are:

- To safeguard the dignity, rights and well-being of children.
- To ensure that children are treated consistently and with sensitivity and respect, when they experience personal care.
- To provide guidance and reassurance to staff.
- To ensure that parents are involved in planning the intimate care of their child and are confident that their concerns and the individual needs of their child are taken into account.
- To reassure parents that staff are knowledgeable about intimate care.

## Principles

As a school we have a duty of care to all children, and this includes attending appropriately to their personal needs. At Castle Academy we believe that children are entitled to have their personal needs met by people they know and trust. During the course of a session, should a child require personal care, a member of staff (their Key Person or a familiar member of the team) will attend discretely and sensitively to their needs in a quiet, designated area.

Castle Academy 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. We recognise the 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. The child's welfare and dignity is of paramount importance. Every child's right to privacy will be respected. The way our staff discharge their duty will be appropriate to the need and age of the child.

The school is committed to ensuring that all staff undertake their responsibilities in such a way that the rights, dignity and welfare of the children are protected. The school is committed to ensuring that staff undertaking these responsibilities are supported by policy, training and monitoring. All school staff receive child protection training, undertake to help children do as much as possible for themselves and develop each child's ability to achieve independence. Staff receive appropriate specialised training and are provided with facilities and equipment to ensure safety, privacy and dignity. An intimate care plan is drawn up for each child requiring such assistance and is carefully planned and agreed in consultation with parents and child. Provision is monitored and regularly reviewed to ensure that policy and procedure is adhered to, and that children and staff remain comfortable with the school's arrangements.

## Children with special educational needs and disabilities

The school recognises that children with special educational needs (SEN) and disabilities can face additional safeguarding challenges and that additional barriers can exist when recognising abuse and neglect in this group of children. These can include:

- assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability without further exploration; • being more prone to peer group isolation than other children;
- the potential for children with SEN and disabilities being disproportionately impacted by behaviours such as bullying, without outwardly showing any signs; and
- communication barriers and difficulties in overcoming these barriers.

***(Keeping Children Safe in Education 2020, para 126.)***

To address these additional challenges we will provide children who require intimate care with additional pastoral support in the form of a key worker and regular reviews of care plan.

## Definition

Intimate care is any assistance that involves touching a child in areas considered private while carrying out a procedure that most children are able to do for themselves, but some are unable to manage without help. This may involve help with eating, drinking, dressing, and matters of personal hygiene such as washing and toileting. In some instances, more specialised intimate assistance may be needed for children with physical or medical difficulties

## Agreement

1. In order to ensure that the intimate care is provided with dignity and respect, Castle Academy will plan carefully liaising with the pupil and family.
2. When drawing up the Intimate Care Plan, the views of the pupil, parents/carers and staff will be taken into account by Castle Academy
3. Staff carrying out the Intimate Care Plan procedure should have the role specified by the DSL of Castle Academy and will agree to adhere to the guidance set to protect themselves and the child.
4. Staff working with pupils requiring intimate care procedures will have enhanced DBS disclosures, access to annual training in Child Protection procedures and receive specific training in intimate care procedures by approved trainers. For example, catheter removal or moving and handling training.
5. In order to ensure the best possible care for pupils who need personal or invasive procedures, identified Castle Academy staff will work with parents/carers and other professionals to ensure they are appropriately trained and confident.
6. Appropriate equipment necessary for Intimate Care procedure will be identified and resourced by the relevant health agencies and/or Castle Academy
7. It is expected that sufficient personal articles e.g. nappies/pads will be provided by the parents/carers.
8. The Intimate Care Plan should be reviewed regularly depending upon the development of the pupil or if there have been any changes in therapeutic or medical needs. It will be reviewed at least annually.
9. Consideration will be given to the pupils' intimate care needs when planning a school trip or residential. The school will identify the pupils' needs and requirements and the facilities available. It will also consider what equipment/resources will need to be transferred or transported.
10. The care given will be recorded in the forms included in Appendix 1 and 2.
11. Risk assessments will be in place to ensure equality of access to all subject lessons, especially practical subjects, physical education and changing facilities where appropriate

## **Rights outlined within the policy**

It is really important that everyone has an agreed understanding of the rights as well as the responsibilities of those involved in the giving and receiving of intimate care. Our principles for this have been outlined below.

### **The child**

The child has the right to assistance that respects his/her dignity, and to feel safe when being moved or handled.

The child has the right to feel comfortable with the adults assisting him/her, and to make it known if this level of comfort is disturbed.

The child should be encouraged to engage in the care procedure, to know what is happening, and give permission at each stage.

The child should be encouraged to work towards independence and helped to do so as much as possible for him/herself.

### **Parents**

Parents have the right to information regarding school policy and procedures designed to meet the needs of their child. The school should work closely with parents to ensure that all aspects of the care procedure are shared and understood.

Parents have a responsibility to ensure that all relevant information is provided to help the school assist their child in an appropriate way. Parents should meet the adult/s who will provide intimate care to the child, and be informed of the school's arrangements in the event of this person/s being absent. It is critical that this is included in the medical needs plan for each child.

The school should gain written permission from parents for the care to be provided.

### **Confidentiality**

Information regarding agreed procedures must be treated confidentially and recorded/held only in the child's school file. This will be done ensuring compliance with GDPR legislation.

Information should not be disclosed or discussed with any adults other than those with responsibility for the child's personal care, and should not be referred to in the presence of other children.

Care should be provided at agreed times, at the child's request or in response to an agreed signal.

Staff should make themselves familiar with the child's manner of communication, whether verbal, sign or eye contact.

Appropriate terminology for parts of the body and bodily function should be used clarified between the child, parents, and his/her assistant/s.

### Writing an intimate care plan

At Castle Academy we will ensure that any child needing to receive intimate care has a plan agreed and understood by all stakeholders.

The plan will be written using the following guidance. Each plan will be bespoke and written for every individual case. The plan should have the child's safety, privacy, and dignity as paramount.

The plan should include:

- Clear information regarding the assistance to be provided;
- The method of communication to be used by the child;
- The named person/s with responsibility to assist the child including arrangements for cover for absence;
- The timetable, if possible, when assistance will be provided;
- Arrangements in the absence of the named assistant/s;
- Arrangements for practical lessons, school events and activities linked to the risk assessment;
- The means by which the arrangement will be monitored;
- Strategies to prevent or deal with questions/comments from other pupils;
- The maintenance of a record of assistance.

While it is recommended to have two members of staff assisting the child, this level of resourcing may not be available, and while the introduction of a second assistant may be perceived as providing protection against allegations of abuse, it can also further erode the child's privacy.

If the plan has been agreed and signed by parents, staff, and child if appropriate, it is acceptable to have one assistant unless there are implications regarding safe handling.

Two persons are required to assist if a hoist is being used. In this case the second person should be identified and made known to the child and parents.

Alternative arrangements must be in place in the absence of one or both of the named staff. However, the school should be aware that the introduction of other staff to the care context without prior arrangement can increase the vulnerability of the child and adults.

The plan should specify the assistance to be provided as clearly as possible e.g., undressing/cleaning the child, changing a nappy, holding child in position, etc.

The assistant/s should talk to the child throughout the procedure e.g. *“I am going to help you undress”, “I am using a wipe to clean your bottom”*.

The assistance should be rehearsed in the bathroom with the parent/s present to ensure clarity. Following this there should be no change to what has been agreed.

Teachers should be made aware of the care timetable, particularly if the child needs to be absent from class, and should be aware of the approximate time the procedure should take. The assistant/s should ensure their return to the classroom is noted.

The plan should be signed by all contributors and reviewed on a regular basis.

### Training and resources

Guidance/advice may often be provided by the child’s parent, and/or the child him/herself. All staff providing personal care must have received child protection training. Specialised training may be required if the child uses a wheelchair, hoist, colostomy bag or requires an invasive procedure such as rectally administered medication. This training may be arranged through the children and Young Peoples Services Directorate of the EA, and the Health Trust School Health Teams.

It is recommended that the school’s arrangements in the absence of named assistants should involve only members of staff who have undergone full safer recruitment procedures including background scrutiny. **Casual substitute staff should not provide intimate care in the school setting.**

The school must provide appropriate accommodation that ensures privacy for the child and is sufficiently spacious to accommodate any other equipment the child may need, such as a changing bench or hoist. The provision of appropriate accommodation and equipment should be arranged in conjunction with the Children and Young Peoples Services Directorate of the EA.



The school should provide resources to ensure that procedures are carried out hygienically. This may include disposable aprons, gloves, wipes and medicated hand washing products.

Additional requirements may include labelled bins for the disposal of soiled waste; items such as needles, catheters, etc., and arrangements for the collection of such waste. This can be arranged through the EMAT Estates team.

Schools should ensure that the assistant has a means of attracting attention and assistance in an emergency.

### **Vulnerability to abuse**

Children should be encouraged to recognise and challenge inappropriate assistance, and behaviour that erodes their dignity and self-worth.

However, the following factors may increase a child's vulnerability:

- Experience of multiple carers;
- The inability to distinguish between assistance and abuse;
- The inability to communicate.

While adults are protected by their adherence to procedure, the following factors may increase their vulnerability:

- The possibility of accidents;
- The possibility of misunderstanding or misinterpretation;
- The possibility of the child becoming aroused.

The school should ensure that the programme of assistance is monitored and both child and adult are given the opportunity to report any concerns that they may have. The school's Designated Leader for Safeguarding may be the most appropriate person to undertake this responsibility

Appendix 1

School: \_\_\_\_\_

**Permission for intimate care**

<b>Child</b>	
<b>DoB:</b>	
<b>Address:</b>	
<b>Parent/guardian:</b>	
<p><b>I/we give permission for the assistance detailed overleaf to be provided to my/our child, and will advise the school of any change that may affect this provision.</b></p> <p><b>Signed:</b></p>	
<p><b>I, the child, give permission for the assistance detailed overleaf to be provided to me.</b></p> <p><b>Signed:</b></p>	

Appendix 2

Intimate care plan		
<b>School:</b>		
<b>Pupil:</b>	<b>DoB:</b>	
<b>Diagnosis:</b>		
The method of communication to be used by the child:		
<b>Assistance to be provided:</b> (e.g. undressing/cleaning the child, changing a nappy, holding child in position, etc)		
<b>Training needs for adults:</b>		
<b>Timetable:</b>		
<b>Strategies to prevent or deal with questions/comments from other pupils:</b>		
<b>Alternative curriculum arrangements:</b> (Practical lessons, school events - See attached risk assessments)		
<b>Named persons assisting:</b> (In pairs)		
<b>Named reserve adults:</b> (In event of absence)		
<b>Location/ equipment / PPE:</b>		

Designation	Signed	Date
Parent		
Pupil		
Key worker		
DSL / Principal		