

DEMAT Intimate Care Policy

Policy type	Non-statutory
Author/Reviewer	Caroline Jupp, Trust Inclusion Lead
Approved by	Adrian Ball, CEO
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Date of next review	11/04/27
Review cycle	2-years Policies will be reviewed in line with DEMAT's internal policy schedule and/or updated when new legislation comes into force
Description of Changes	Section • 5.1 - Addition - Where appropriate advice will be gathered and referrals will be made to support the family with external professionals (e.g. healthcare professionals, ERIC, local support teams). • 5.1 - delivery of sex and relationship education replaced with during the relationship education (sex and health) • 5.1 - drawn up replaced with co-produced with parents • 5.1 – Addition - This will be agreed and detailed on individual intimate care plans at a school level. • 5.1 - Wherever possible one child will be cared for by one adult, unless there is a sound reason, for having two adults in attendance (in such a case, the reasons will be documented). Replaced with Wherever possible, a second adult will always be present for safeguarding purposes and the reasons will be documented. Safeguarding checks and processes will ensure over-familiar relationships do not develop. • 5.1 – Removed - Wherever possible the same child will not be cared for by the same adult on a regular basis; there will be a rota of carers known to the child who will take turns in providing care. This will ensure, as far as possible, inappropriate relationships are discouraged from developing, while at the same time guarding against the care being carried out by a succession of completely different carers. • 5.1 – Addition - A clear account of the agreed arrangements will be recorded on the child's care plan, at least twice a year. • 5.3.2 – Addition - EYFS statutory framework for group and school-based providers with specific reference to section 3: The Safeguarding and Welfare Guidance. • 5.3.3 – Addition - If a pattern is beginning to emerge, appropriate procedures should be implemented to monitor this and respond appropriately. • Changes to policies referenced – DEMAT Supporting Pupils with Medical Needs Policy, DEMAT EYFS Policy • Replace DEMAT Accessibility Plan with School based Accessibility Plan

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1. Definitions

Intimate care is defined as any care tasks of an intimate nature which involves washing, touching or carrying out an invasive procedure that most children and young people carry out for themselves, but which some are unable to do. These can be associated with bodily functions, body products and personal hygiene. Examples include care associated with continence and menstrual management as well as more ordinary tasks such as help with drying, changing or dressing following physical activity. Disabled pupils may be unable to meet their own care needs for a variety of reasons and will require regular support.

2. Application of this Policy

The policy is applicable to all employees (permanent and temporary) of DEMAT. Where applicable, it is also applicable to all Volunteers supporting DEMAT.

The above definitions are included as reference purposes for both School and Central Team staff to enable clarity and transparency when applying this policy.

3. Relationship with DEMAT Values

The application of this policy must be always applied in a way that reflects the values of DEMAT and its Christian Ethos:

Love – We engender love and tolerance between and for our staff, pupils and others to foster an inspiring atmosphere of mutual support.

Community – We are committed to ensuring our schools are a living part of the community and contribute positively to its needs.

Respect – We do everything to provide a caring, safe and secure place for our staff and pupils to be happy and respected in our schools so they may achieve their potential.

Trust – We acknowledge accountability and responsibility for our actions and ensure that we encourage each other to make brave decisions and then learn from any mistakes.

Ambition – We are determined that our schools offer a place for the joy of learning, enabling those of all abilities to thrive and go on to lead rewarding lives.

4. Purpose and Scope

4.1. Policy Statement

Staff who work with young people who have special needs will realise that the issue of intimate care is complex and will require staff to be respectful of children's needs. DEMAT is committed to ensuring that all staff responsible for intimate care of children and young people will always undertake their duties in a professional manner.

DEMAT takes seriously its responsibility to safeguard and promote the welfare of children and young people in its care. Staff dealing with continence issues work within guidelines that protect themselves and the pupils involved.

The Trust Board recognises its duties and responsibilities in relation to the Equality Act 2010 which requires that any child with an impairment that affects his/her ability to carry out normal day-to-day activities must not be discriminated against.

Children's dignity will be preserved, and a high level of privacy, choice and control will be provided to them. Staff who provide intimate care to children have a high awareness of child protection issues. No child shall be attended to in a way that causes distress, embarrassment or pain.

Staff behaviour is open to scrutiny and staff from the Academy will work in partnership with parents/carers to share information and provide continuity of care to young people wherever possible.

5. Procedures

5.2 Our approach to best practice

- The management of all children with intimate care needs will be carefully planned.
- Staff who provide intimate care are trained to do so (including Child Protection and Moving and Handling where appropriate) and fully aware of best practice.
- Where specialist equipment and facilities above that currently available in the Academy are required, apparatus will be provided to assist with children who need special arrangements following assessment from physiotherapist/ occupational therapist.
- Where appropriate advice is gathered and referrals will be made to support the family with external professionals (e.g. healthcare professionals, ERIC, and local support teams).
- There is careful communication with each child who needs help with intimate care in line with their preferred means of communication (verbal, symbolic, etc.) to discuss the child's needs and preferences. The child is aware of each procedure that is carried out and the reasons for it.
- Staff will be supported to adapt their practice in relation to the needs of individual children considering developmental changes such as the onset of puberty and menstruation. Wherever possible, staff who are involved in the intimate care of young people will not usually be involved with supporting the child in lessons during the relationship education (sex and health) as an additional safeguard to both staff and the young people involved. In such a case, the reasons will be documented.
- As a basic principle, children will be supported to achieve the highest level of independence possible, according to their individual condition and abilities. Staff will encourage each child to do as much for themselves as they can.
- Individual intimate care plans will be co-produced with parents for certain children as appropriate to suit the circumstances of the child. Each child's right to privacy will be respected.
- Careful consideration will be given to each child's situation to determine how many carers might need to be actively involved when a child needs help with intimate care. This will be agreed on and detailed on individual intimate care plans at a school level.
- Wherever possible, a second adult will always be present for safeguarding purposes and the reasons will be documented. Safeguarding checks and processes will ensure over-familiar relationships do not develop.

- Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the care plan. A clear account of the agreed arrangements will be recorded on the child's care plan, at least twice a year.
- The needs and wishes of children and parents/carers will be considered wherever possible, within the constraints of staffing and equal opportunities legislation.
- Where a care plan is not in place and a child needs help with intimate care (in the case of an infrequent toilet 'accident') then parents/carers will be informed the same day. This information should be treated as confidential and communicated in person, via telephone or by sealed letter (not via the Home/Academy diary).
- Make sure that regular intimate care for a child is included in the responsible staff member's job description.

5.3 How staff will be trained

5.3.1. Staff will receive:

- Training in the specific types of intimate care they undertake.
- Regular safeguarding training.
- If necessary, manual handling training that enables them to remain safe and for the pupil to have as much participation as is possible.

5.3.2. They will be familiar with:

- The control measures set out in risk assessments carried out by the Academy.
- Hygiene and Health & Safety procedures.
- They will also be encouraged to seek further advice as needed.
- EYFS statutory framework for group and school-based providers with specific reference to section 3: The Safeguarding and Welfare Guidance.

5.3.3. Seeking parent/carer permission:

- For children who need routine or occasional intimate care (e.g., for toileting or toileting accidents), parents will be asked to sign a consent form.
- For children whose needs are more complex or who need support outside of what's covered in the permission form (if used), an intimate care plan will be created in discussion with parents
- Where there isn't an intimate care plan or parental consent for routine care in place, parental permission will be sought before performing any intimate care procedure. If a pattern is beginning to emerge, appropriate procedures should be implemented to monitor this and respond appropriately.
- If the Academy is unable to get in touch with parents and an intimate care procedure urgently needs to be carried out, the procedure will be carried out to ensure the child is comfortable, and the Academy will inform parents afterwards.
- For pupils needing routine intimate care, the academy expects parents to provide, when necessary, a good stock (at least a week's worth in advance) of necessary resources, such as nappies, underwear and/or a spare set of clothing.
- Any soiled clothing will be contained securely, clearly labelled, and discreetly returned to parents at the end of the day.

5.4. Child Protection

Any roles who may carry out intimate care will have this set out in their job description.

No other staff members can be required to provide intimate care.

- All staff at the school who carry out intimate care will have been subject to an enhanced Disclosure and Barring Service (DBS) with a barred list check before appointment, as well as other checks on their employment history.
- It is recognised that disabled children are particularly vulnerable to all forms of abuse. Child Protection and Multi-Agency Child Protection procedures will be always adhered to.
- Where appropriate, all children will be taught personal safety skills carefully matched to their level of development and understanding.
- If a member of staff has any concerns about physical changes in a child's presentation (unexplained marks, bruises or soreness for example) s/he will immediately report concerns to the Designated Person for Child Protection. A clear record of the concern will be completed and logged using the Academy's safeguarding system. If a referral is going to be made, Parents will be asked for their consent unless doing so is likely to place the child at greater risk of harm.
- If a child becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be investigated at an appropriate level and outcomes recorded.
- Parents/carers will be contacted at the earliest opportunity as part of the process of reaching a resolution. Further advice will be taken from partner agencies.
- If a child makes an allegation against a member of staff, all necessary procedures will be followed in line with the DEMAT Safeguarding & Child Protection Policy.

5.5 Record Keeping

All instances of intimate care will be logged into CPOMS, and parents informed.

6. Associated Policies and Documents

This Policy/Procedure should be read in conjunction with the following DEMAT Policies/Procedures:

DEMAT Safeguarding and Child Protection Policy

DEMAT Exclusion Policy

DEMAT Behaviour Policy

DEMAT SEND Policy

SEN Information Report

DEMAT Supporting Pupils

Medical Needs Policy

DEMAT EYFS Policy

DEMAT Accessibility plan - school

7. Version control

This policy will be reviewed on a biennial basis

Appendix 1

Intimate care plan

Use this template for pupils who need regular support with toileting, washing and/or changing.

PARENTS/CARERS	
Name of child	
Type of intimate care needed	
How often care will be given	
What training staff will be given	
Where care will take place	
What resources and equipment will be used, and who will provide them	
How procedures will differ if taking place on a trip or outing	
Name of senior member of staff responsible for making sure care is carried out according to the intimate care plan	
Name of parent or carer	
Relationship with child	
Signature of parent or carer	
Date	
CHILD	
How many members of staff would you like to help?	
Do you mind having a chat when you are being changed or washed?	
Signature of child	
Date	

This plan will be reviewed twice a year.

Next review date:

To be reviewed by:

Appendix 2

Intimate care: parent/carer consent form

Use this general permission form if you're a setting with a high proportion of children not yet toilet trained.

PERMISSION FOR ACADEMY TO PROVIDE INTIMATE CARE	
Name of child	
Date of birth	
Name of parent/carer	
Address	
I give permission to the academy to provide appropriate intimate care for my child (e.g., changing soiled clothing, washing and toileting)	☐
I will advise the academy of anything that may affect my child's personal care (e.g., if medication changes or my child has an infection)	☐
I understand the procedures that will be carried out and I will contact the academy immediately if I have any concerns	☐
I do not give consent for my child to be washed and change in case of a toileting accident. Instead, the academy will contact me, or my emergency contact and I/they will organise for my child to be washed and changed. I understand that if the academy cannot reach me or my emergency contact, staff will need to wash and change my child, following the academy's intimate care policy, to ensure comfort and remove barriers to learning.	☐
Parent signature	
Name of parent	
Relationship with child	
Date	