

Intimate care policy

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1. Introduction

The Diocese of Bristol Academies Trust (DBAT) is a multi-academy trust with a faith designation and a Christian religious ethos that is both distinctive and inclusive. Distinctive in the sense that all decisions about the nature and purpose of the Academy are taken through the lens of Christian values, inclusive in the sense that all students and staff are equally valued for their uniqueness in the eyes of God and their belonging to the school community.

2. Ethos statement

Vision

The Diocese of Bristol Academies Trust (DBAT) shares the Church of England's Vision for Education 2016, "Deeply Christian, Serving the Common Good", which includes four basic elements wisdom, hope, community and dignity. We aim to deliver values-led education with the very best outcomes for children and young people.

Purpose

To provide high quality education enabling young people to flourish and grow: spiritually, in love and in understanding.

3. Scope/aims

This policy aims to ensure that:

- > Intimate care is carried out properly by staff, in line with any agreed plans
- > The dignity, rights and wellbeing of children are safeguarded
- > Pupils who require intimate care are not discriminated against, in line with the Equality Act 2010
- Parents/carers are assured that staff are knowledgeable about intimate care and that the needs of their children are taken into account
- Staff carrying out intimate care work do so within guidelines (i.e. health and safety, manual handling, safeguarding protocols awareness) that protect themselves and the pupils involved

Intimate care refers to any care that involves toileting, washing, changing, touching or carrying out an invasive procedure to children's intimate personal areas.

4. Legislation and Statutory Guidance

This policy complies with <u>statutory safeguarding guidance</u>.

It also complies with our funding agreement and articles of association.

5. Role of parents/carers

5.1 Seeking parental permission.

For children who need routine or occasional intimate care (e.g. for toileting or toileting accidents), parents/carers 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/carers (see section 3.2 below).

All schools, include this:

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 the school is unable to get in touch with parents/carers 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 school will inform parents/carers afterwards.

5.2 Creating an intimate care plan.

Where an intimate care plan is required, it will be agreed in discussion between the school, parents/carers, the child (when possible) and any relevant health professionals.

The school will work with parents/carers and take their preferences on board to make the process of intimate care as comfortable as possible, dealing with needs sensitively and appropriately.

Subject to their age and understanding, the preferences of the child will also be taken into account. If there's doubt whether the child is able to make an informed choice, their parents/carers will be consulted.

The plan will be reviewed twice a year, even if no changes are necessary, and updated regularly, as well as whenever there are changes to a pupil's needs.

See appendix 1 for a blank template plan to see what this will cover.

5.3 Sharing information

The school will share information with parents/carers as needed to ensure a consistent approach. It will expect parents/carers to also share relevant information regarding any intimate matters as needed.

6. Role of staff

6.1 Which staff will be responsible.

Any roles who may carry out intimate care will have this set out in their job description. This includes Teaching Assistants, HLTAs and Teachers.

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.

6.2 How staff will be trained.

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 possible
- They will be familiar with:
- The control measures set out in risk assessments carried out by the school
- Hygiene and health and safety procedures
- They will also be encouraged to seek further advice as needed

7. Intimate care procedures

7.1 How procedures will happen.

Where intimate care needs to happen, there will be 2 members of staff present. Procedures will be carried out in a private space such as the disabled toilet or hygiene room.

When carrying out procedures, the school will provide staff with:

Protective gloves, cleaning supplies, changing mats and appropriate bins and waste management bags.

For pupils needing routine intimate care, the school expects parents/carers 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/carers at the end of the day.

7.2 Concerns about safeguarding

If a member of staff carrying out intimate care has concerns about physical changes in a child's appearance (e.g. marks, bruises, soreness), they will report this using the school's safeguarding procedures.

If a child is hurt accidentally or there is an issue when carrying out the procedure, the staff member will report the incident immediately to DSL.

If a child makes an allegation against a member of staff, the responsibility for intimate care of that child will be given to another member of staff as quickly as possible and the allegation will be investigated according to the school's safeguarding procedures.

8. Links with other policies

This policy links to the following policies and procedures:

- > Accessibility plan
- > Child protection and safeguarding
- > Health and safety
- > SEND
- > Supporting pupils with medical conditions

9. Our Ethos and Values

As identified at the opening of this policy, our structure and approach here is underpinned by our Christian ethos and values, focused on an ethos that is both distinctive and inclusive.

In our adoption and subsequent adaptation of this policy we have asked ourselves two clear questions: "Is this policy and practice underpinned by our vision and values?" and "What is the impact of our vision and values on those subject to the policy?". This is a key focus of our ongoing development of policy and practice.

Appendix 1: template intimate care plan

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 ensuring care is carried out according to the intimate care plan		
Name of parent or carer		
Relationship to 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: template parent/carer consent form

PERMISSION FOR SCHOOL TO PROVIDE INTIMATE CARE				
Name of child				
Date of birth				
Name of parent/carer				
Address				
I give permission for the school to care to my child (e.g. changing soil toileting)				
I will advise the school of anything personal care (e.g. if medication chinfection)				
I understand the procedures that a contact the school immediately if I				
 I do not give consent for my child to be given intimate care (e.g. to be washed and changed if they have a toileting accident). Instead, the school will contact me or my emergency contact and I will organise for my child to be given intimate care (e.g. be washed and changed). I understand that if the school cannot reach me or my emergency contact, if my child needs urgent intimate care, staff will need to provide this for my child, following the school's intimate care policy, to make them comfortable and remove barriers to learning. 				
Parent/carer signature		I		
Name of parent/carer				
Relationship to child				
Date				

History of most recent policy changes and review period

Date	Page	Change(s) made	Origin of Change (e.g. TU request, change in legislation)
November 2023	All	New Policy	

Policy Owner		Education Directorate	
Date Adopted		Nov 2023	
Latest Review Date			
Next Review Date		Nov 2026	
Level		Level 2	
DBAT Policy levels:			
LEVEL 1 DBAT p		policy for adoption (no changes can be made by the Academy Council;	
the Ac		ademy Council must adopt the policy)	
LEVEL 2 DBAT		policy for adoption and local approval, with areas for the Academy to	
update		e regarding local practice (the main body of the policy cannot be	
	changed)		
LEVEL 3	DBAT model policy that the Academy can adopt if it wishes		
LEVEL 4 Local policy to be approved by the Academy Council			