



## Intimate Care Policy

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## **1. Introduction**

1.1 QEGSMAT (the Trust) is committed to the safeguarding and wellbeing of all our students. This policy forms part of our suite of safeguarding policies.

1.2 Staff who work at one of the Trust's academies with students who have intimate care needs are respectful of students' needs. Intimate care can be defined as 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 nappy changing, toileting, incontinence and menstrual management as well as more ordinary tasks such as help with washing.

- Students' dignity will be preserved and a high level of privacy, choice and control will be provided to them.
- Staff who provide intimate care to students have a high awareness of student protection issues. Staff behaviour is open to scrutiny and staff at the Trust's academies work in partnership with parents/carers to provide continuity of care to our students wherever possible.
- Staff deliver a full PSHE curriculum as an integral part of the academy's overall curriculum offer; this is delivered to all our students as appropriate to their developmental level and degree of understanding. This work is shared with parents, as appropriate, who are encouraged to reinforce the personal safety messages within the home.
- QEGSMAT is committed to ensuring that all staff responsible for the intimate care of students will undertake their duties in a professional manner at all times. We recognise that there is a need to treat all students with respect when intimate care is given. No student should be attended to in a way that causes distress or pain.

## **2. Our approach to best practice**

2.1 All students who require intimate care are treated respectfully at all times; the students' welfare and dignity is of paramount importance. Staff who provide intimate care will be trained to do so as appropriate, for example, in moving and handling; each student's needs will be examined on a case-by-case basis and those providing intimate care for a child will seek appropriate training through the Premises Manager/Headteacher/Health and Safety Coordinator, who will advise on relevant risk assessments. Apparatus will be provided to assist with students who need special arrangements following assessment from physiotherapist/occupational therapist as required.

- Staff will be supported to adapt their practice in relation to the needs of individual students, taking into account developmental changes such as the onset of puberty and menstruation. Wherever possible staff who are involved in the intimate care of students will not usually be involved with the delivery of sex and relationship education to their students as an additional safeguard to both staff and students involved.

- There is careful communication with each student who needs help with intimate care in line with their preferred means of communication (verbal, symbolic, etc.) to discuss the student's needs and preferences. The student is aware of each procedure that is carried out and the reasons for it.
- As a basic principle students will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each student to do as much for themselves as they can. This may mean, for example, giving the student responsibility for washing themselves. Individual intimate care plans will be drawn up for a particular student as appropriate to suit their circumstances. These plans include a full risk assessment to address issues such as moving and handling, personal safety of the student and the carer and health needs
- Each student's right to privacy will be respected. Careful consideration will be given to each student's situation to determine how many carers might need to be present when a student needs help with intimate care (we will always respect the student's rights of privacy). Wherever possible one student will be cared for by one adult, unless there is a sound reason for having two adults present. If this is the case, the reasons should be clearly documented.

### **3. Communication with Parents and Advocacy**

- 3.1 Parents/carers will be involved with their child's intimate care arrangements on a regular basis; a clear account of the agreed arrangements will be recorded. The needs and wishes of students and parents will be carefully considered alongside any possible constraints; e.g. staffing and equal opportunities legislation.
- All care plans are checked and, if necessary, amended at annual review meetings for statemented learners. For those learners with an Educational Health Care Plan who need intimate care the plan is reviewed at least annually and amended as appropriate at any point during the year if needed.
  - Each student will have an assigned member of staff to act as an advocate to whom they will be able to communicate any issues or concerns that they may have about the quality of care they receive. If a student voices an issue of concern to a member of the care team, that member of staff will inform one of the academy's designated Child Protection Officers. (Please refer to the Child Protection and Safeguarding Policy for details of named responsible officers).

### **4. The Protection of Students**

- 4.1 Derbyshire Safeguarding Children Board procedures and Inter-Agency Child Protection procedures will be accessible to staff and adhered to.
- 4.2 If a member of staff has any concerns about physical changes in a pupil's presentation, e.g. marks, bruises, soreness etc. s/he will immediately refer this to the Designated Safeguarding Lead (DSL). They will follow the procedure as outlined in our Child Protection and Safeguarding Policy and local procedures.

- 4.3 If a student becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be looked into and outcomes recorded. Parents/carers will be contacted at the earliest opportunity as part of this process in order to reach a resolution. Staffing schedules will be altered until the issue(s) are resolved so that the student's needs remain paramount. Further advice will be taken from outside agencies if necessary.

## **5. Roles and Responsibilities**

- 5.1 The Headteacher and DSL are responsible for the implementation, monitoring and evaluation of this policy. As a member of the Senior Leadership Team, it ensures that the intimate care of our students is dealt with at the highest level and forms part of the monitoring of safeguarding in the academy.
- 5.2 The SENDCo, members of the safeguarding team and the Medical Welfare Officer (or equivalents, as appropriate) liaise with parents and deploy the care team to students requiring intimate care. They ensure that the care team are suitably trained to carry out their duties.
- 5.3 The Site Manager (or equivalent) ensures that the hygiene rooms at the academy are fit for purpose and meet the care needs of the students who require them.