

Intimate Personal Care

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Agreed by	Melissa Albert
Signed on behalf of the Trust	Sue Lane
Review Cycle	Annually or when protocol changes
Date of next review	September 2024

1. Introduction

Highlees is aware that some learners may require assistance from members of staff for personal care, including toileting, either due to the age and developmental level of the student, or as a result of disability or medical need. The main aim of the school is to ensure that our learners are safe, secure and protected from harm.

2 Aim of the policy

1.1 The intimate care policy aims to provide a clear framework for staff to ensure the safety and dignity of all learners who need support with personal care, including toileting and continence management. It will also clarify for learners and their families the support that school can give them. It should be read in conjunction with the schools' policies as below:

- Safeguarding policy and child protection procedures
- Staff code of conduct and guidance on safer working practice
- Health and Safety policy and procedures
- Special Educational Needs policy

1.2 This policy has been developed to safeguard children and staff. It applies to everyone involved in the intimate care of children.

2. Definition

2.1 Intimate care can be defined as any care associated with bodily functions, body products and personal hygiene which demand direct or indirect contact with or exposure of the sexual parts of the body. Most people usually carry out intimate care themselves, but because of their young age, physical difficulties or other special needs some pupils are unable to do so. The need for intimate care may occur on a regular basis or a one off; it can also include supervision of pupils involved in intimate self-care.

2.2 Intimate care is any care which involves the following;

- Assisting a child to change his/her clothes
- Changing or washing a child who has soiled him/herself
- Assisting with toileting issues
- Supervising a child involved in intimate self-care
- Providing first aid assistance

- Providing comfort to an upset or distressed child
- Feeding a child
- Providing oral care to a child
- Assisting a child who requires a specific medical procedure and who is not able to carry this out unaided. In the case of a specific procedure only a train and assessed as competent member of staff would undertake the procedure.

It's the parent's responsibility to notify the school of any known intimate care need for their child, so correct care can be given.

3. Principles

3.1 The following are the fundamental principles upon which the policy is based;

- To ensure a safe environment for the child and staff member.
- Every child has the right to be safe.
- Every child has the right to personal privacy.
- Every child has the right to be valued as an individual.
- Every child has the right to be treated with dignity and respect.
- Every child has the right to be involved and consulted in their own intimate care to the best of their abilities.
- Every child has the right to express their views on their own intimate care and to have such views taken into account.
- Every child has the right to have levels of intimate care that are as consistent as possible.

4. Best Practice

4.1 We recognise that there is a need to treat all pupils, whatever their age, gender, disability, religion, ethnicity or sexual orientation with respect and dignity when intimate care is given. The child's welfare is of paramount importance and his/her experience of intimate and personal care should be a positive one. It is essential that every pupil is treated as an individual and that care is given gently and sensitively: no pupil should be attended to in a way that causes distress or pain.

4.2 Staff will work in close partnership with parent/carers and other professionals to share information and provide continuity of care.

4.3 All staff undertaking intimate care will be given appropriate training.

- 4.4 Pupils who require regular assistance with intimate care will have health care plans or intimate care plans agreed by staff, parents/carers and any other professionals actively involved, such as school nurses or physiotherapists. Ideally the plan should be agreed at a meeting where the pupil and all key staff should be present. Wherever possible and appropriate, the pupil should be included in the discussions related to their care plan and not just a passive listener. Any historical concerns (such as past abuse) should be taken into account. The plan should be reviewed as necessary, but at least annually, and at any time of change of circumstances, e.g. for residential trips or staff changes (where the staff member concerned is providing intimate care). They should also take into account procedures for educational visits/day trips.
- 4.5 A written record will be kept of all support with intimate care. This will include the date and time of the care, who was present and any care given, together with the reason for this. Any changes in the learner's behaviour or appearance will be documented and reported to a senior member of staff, in line with the safeguarding policy. These records will be kept in the pupil's file and available to parents/carers on request.
- 4.6 Where relevant, it is good practice to agree with the pupil and parents/carers appropriate terminology for private parts of the body and functions and this should be noted in the plan.
- 4.7 Where a care plan is **not** in place, parents/carers will be informed the same day if their child has needed help with meeting intimate care needs (e.g. has had an 'accident' and wet or soiled him/herself). It is recommended practice that information on intimate care should be treated as confidential and communicated in person by telephone or by sealed letter, not through the home/school diary. This act of care will be reported to a senior member of staff and documented.
- 4.8 All pupils will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each individual pupil to do as much for his/herself as possible.
- 4.9 Staff who provide intimate care should speak to the pupil personally by name, explain what they are doing and communicate with all children in a way that reflects their age and cognitive ability.
- 4.10 Every pupil's right to privacy and modesty will be respected. Careful consideration will be given to each pupil's situation to determine who and

how many carers might need to be present when s/he needs help with intimate care. SEN advice suggests that reducing the numbers of staff involved goes some way to preserving the child's privacy and dignity. Wherever possible, the pupil's wishes and feelings should be sought and taken into account.

- 4.11 An individual member of staff should inform another appropriate adult when they are going alone to assist a pupil with intimate care.
- 4.12 The religious views, beliefs and cultural values of children and their families should be taken into account, particularly as they might affect certain practices or determine the gender of the carer.
- 4.13 Adults who assist pupils with intimate care should be employees of the school, not students or volunteers, and therefore have the usual range of safer recruitment checks, including enhanced DBS checks.
- 4.14 Health & Safety guidelines should be adhered to regarding waste products, if necessary; advice should be taken from the DCC Procurement Department regarding disposal of large amounts of waste products or any quantity of products that come under the heading of clinical waste.
- 4.15 No member of staff will carry a mobile phone, camera or similar device whilst providing intimate care.

Assisting a pupil to change his/her clothes

- 4.15.1 On occasions a pupil may require some assistance with changing, for example; he/she has had an accident at the toilet, gets wet outside, or has vomit on his/her clothes.
- 4.15.2 Staff will always encourage children to attempt undressing and dressing unaided.
- 4.15.3 Staff will always ensure that they have a colleague in attendance when supporting dressing/undressing.

4.16 Changing a pupil that has soiled him/herself

- 4.16.1 The pupil will be given the opportunity to change his/her underwear in private themselves.
- 4.16.2 School will have a supply of wipes, clean underwear and spare uniform for this purpose.
- 4.16.3 If the pupil is not able to complete the task unaided, the emergency contact will be informed of the situation.
- 4.16.4 If the emergency contact is able to come to school within an appropriate time frame, the pupil will be accompanied and supported by a staff member until they arrive. This avoids any further distress and preserves dignity.
- 4.16.5 If the emergency contact cannot attend, the school will seek verbal permission for staff to change the pupil. If however none of the contacts can be reached the School Principal will make the decision based on loco-parentis and the schools care of duty to meet the needs of pupils.
- 4.16.6 Some pupils with additional needs may need regular changing. A care plan will be completed by the class teacher and the staff supporting the changing will have read and signed the Nappy changing procedure guidelines. Please see Nappy change guidance Appendices 1 and the care plan ,Appendices 2.
- 4.16.7 Two members of staff are needed to complete personal/intimate care.

4.17 Assisting a pupil who requires a specific medical procedure and who is not able to carry this out unaided.

- 4.17.1 The school Administration of Medication policy outlines arrangements for the management of medication in school.

Parental permission must be given before any medication is dispensed in school – the form can be found on our website, or a copy can be obtained from the school office.

4.17.2 In some circumstances a number of children will have significant medical needs which will require them to have an individual care plan. The plan will be developed with the relevant medical body and training, if needed, will be given to staff.

4.18 Massage

4.18.1 Massage is now commonly used with pupils who have complex needs and/or medical needs in order to develop sensory awareness, tolerance to touch and as a means of relaxation.

4.18.2 Any adult undertaking massage for pupils will be suitably qualified and/or will have demonstrated an appropriate level of competence.

4.18.3 Care plans should include specific information for those supporting pupils with bespoke medical needs.

4.18.4 Any massage given by a member of staff will be confined to the hands, feet and face in order to safeguard both parties.

4.19 Swimming

4.19.1 Swimming is an important part of the school curriculum. Children are entitled to respect and privacy when changing their clothes. However, there must be the required level of supervision to safeguard young people with regard to health and safety considerations and to ensure that bullying, teasing or other unacceptable behaviour does not occur.

4.20 Residential Trips

4.20.1 Residential trips are an important part of our children's experience. These trips require particular care when supervising pupils in a less formal setting. Below are a list of specific intimate care issues, which will arise during these trips;

4.20.1.1 Showering

4.20.1.2 Children are entitled to respect and privacy when changing their clothes and taking a shower; however, there must be the required level of supervision to safeguard young people with regard to health and safety considerations and to ensure that

bullying, teasing or other unacceptable behaviour does not occur.

4.20.1.2.1 Staff should announce their intention of entering the changing rooms, avoid remaining in changing rooms unless pupil needs require it.

4.20.1.2.2 Given the nature and vulnerability of the situation, it is recommended that another member of staff should also be present.

4.20.2 Night time routine

4.20.2.1 At bedtime, pupils are given a set amount of time to change and prepare for bed, they will be told when a supervising adult will visit the room to check all is okay and to switch of the lights, a similar process is also followed in the morning. Staff should knock and announce their intention to enter any bedroom.

6. Child Protection

6.2 The school's child protection procedures will be adhered to.

6.3 From a child protection perspective it is acknowledged that intimate care involves risks for children and adults as it may involve staff touching private parts of a pupil's body. In this school best practice will be promoted and all adults (including those who are involved in intimate care and others in the vicinity) will be encouraged to be vigilant at all times, to seek advice where relevant and take account of safer working practice.

6.4 Where appropriate, pupils will be taught personal safety skills carefully matched to their level of development and understanding.

6.5 If a member of staff has any concerns about physical changes in a pupil's presentation, e.g. unexplained marks, bruises, etc s/he will immediately report concerns to the Designated Safeguarding Person.

Nappy Changing Procedure

School staff will bear in mind the following key principles when changing a child's nappy:

- Children have the right to feel safe & secure
- Children will be respected and valued as individuals
- Children have a right to privacy / dignity
- In order to promote and develop greater independence, children need to be supported in their understanding of toileting procedures To ensure children are comfortable and happy, nappies will be checked at regular intervals and promptly changed when required. (I.e. when wet or soiled.)

Working with Parents/Carers

- We will work with parents when developing a child's nappy changing routine.
- If a child has any disability or medical need that may affect their personal care routine, a Health Care Plan will be drawn up in agreement with parents/carers.
- Parents will be asked when their child first starts at the school whether or not they have any particular needs or any special words or actions used during their nappy changing procedure.
- Any significant observations made during a nappy changing procedure will be notified to the parents at the end of the session (i.e. badly soiled nappy/strong urine etc.)
- Parental meeting will take place every three weeks to discuss progress towards independence. This will be minuted and actions will also be agreed by the SENCO.

Achieving Continence

We will encourage all children to achieve continence when they exhibit signs that they are ready. This will be achieved through modelling, positive praise, working with parents and having high expectations. In addition to this, a child's key person will ensure that nappy changing times are relaxed and a time to promote increasing independence.

Changing procedures followed by staff:

- 2 members of staff are needed to be able to fully support a child.
- Prepare the changing mat by cleaning it with antibacterial spray.
- Ensure the following items are ready before changing a child's nappy; clean nappy, wipes and nappy cream if required. (N.B - where cream is used the child should have their own named cream and written permission obtained from the parent).
- Approach the child and say or sign that it's time for a nappy change.
- Wash and dry your hands and put on a pair of disposable gloves/disposable apron/face mask. (N.B - staff must put a fresh set of gloves on for every child that has a nappy changed.)
- Support the child on to the nappy changing unit using the 'steps'.
- Remove the child's clothing to access the nappy.
- Staff members will then remove the child's nappy and clean the area, always from front to back using wipes and cream provided by the parents/carers. The member of staff must ensure the child is clean and comfortable by putting on a clean nappy and a clean set of clothes if required.
- If the child's clothes are soiled, they should be bagged separately and sent home, they should not be rinsed by hand.
- The staff member must then wash the changing table with antibacterial spray.
- Soiled nappies will be placed into a tie handle bag then placed into the designated nappy bin.

Protection for Staff

As far as possible nappy changing procedures will be carried out by a child's key person. Protection for that person will be undertaken in the following ways:

- 2 members of staff should be present
- Staff will be trained in good working practices which comply with Health and Safety regulations.
- Staff will discreetly inform other key workers that they are taking a child to the toilet to change.

- . Each instance of intimate care will be recorded by the adult who completed it. Details recorded will include: - what personal care tasks were carried out - by who - the time and date it was completed.
- . If a situation occurs that causes a member of staff concern, a second member of staff will be called and the incident reported to the line manager and recorded.
- . Where staff are concerned about a child's actions or comments whilst carrying out a personal care procedure, this should be recorded and discussed with the school's designated safeguarding lead (DSL) immediately.
- . Staff will be specifically trained in the area of Intimate/Personal care for children with specific needs.
- . To ensure the safe moving and handling of children, children will use 'steps' to independently climb onto the changing area, with support provided if needed.
- . The staff member must then place the used gloves in the bin provided and wash their hands with liquid antibacterial soap and running water and then dry them on a disposable paper towel.
- . Staff will help the child to wash their hands using liquid soap, warm water and paper towel and then take them back to the classroom to continue with their activities / play.
- . Staff will then return to the nappy changing area, clean the changing mat, surrounding area and underneath the mat before leaving to dry.
- . If a child is old enough to meet his own toileting needs, the staff member can support the child according to age and ability to use a potty or toilet, ensure they are comfortable, clean and dry and have washed their hands afterwards.
- . Staff members will also ensure that potties are available for children being toilet trained and cleaned with antibacterial cleaner after every use.
- . When supporting a child that needs to be changed the staff member will approach the child and explain that they would need to clean and change them into some dry clothes.
- . The staff member will put on a pair of disposable gloves/apron.
- . Remove the wet/soiled clothes from the child.
- . Clean the areas that need cleaning/ a shower might need to be used in some circumstances. The staff member will talk through with the child what they are about to do so that they are happy and understanding. If a child is capable of doing so they can help with the removal of any clothing.

- Wet/soiled clothing will be put into a bag so that they can be sent home
- Staff member will wash their hands with antibacterial soap and running water and then dry them on a disposable paper towel.
- Staff will help the child to wash their hands using liquid soap, warm water and paper towel and then take them back to the nursery room to continue with their activities/play.
- Staff will return to the changing area and clean the area

Parental Responsibilities

- Parents understand and agree the procedures that will be followed when their child is changed at school.
- Parents must sign a consent form granting permission for their child's nappy to be changed.
- The school requires parents to supply nappies, wipes and sundries that will be used and applied as necessary.
- Parents understand that they will be asked to collect their child from school if their child shows symptoms of illness or indications of ill health.
- Parents must send their child in nappies or protective underwear until they are dry and clean the majority of the time.



Bringing out the Best

Care Plan

Child's Name:

D.O.B:

Name of Support Staff:

Area of Need:

Equipment Required:

Location of Suitable facilities:

Frequency of Support:

Other details:
.....
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Working Towards independence

The Child will try to:

Staff Assisting will support by:

Review Date:

Agreed and signed by:

Parents/carers: Date:

Child (if appropriate): Date:

SENCO: Date:



Bringing out the Best

Toilet Management Plan Agreement between Staff and Child

Child's Name:

D.O.B:

Key Adult Name:

Adults will:

As the person helping you in the toilet you can expect me to do the following:

- I will stop what I am doing to help you in the toilet as soon as you ask me;
- I will avoid all unnecessary delays;
- When you use our emergency agreed signal, I will stop what I am doing and come and help;
- I will treat you with respect and ensure privacy and dignity at all times;
- I will ask permission before touching you or your clothing;
- I will check that you are as comfortable as possible, both physically and emotionally;
- If I am working with a colleague to help you, I will ensure that we talk in a way that does not embarrass you;
- I will look and listen carefully if there is something you would like to change about your Toilet.

The Child will:

As the child who needs help in the toilet you can expect me to do the following:

- I will try, whenever possible to let you know a few minutes in advance, that I need to go to the toilet, so that you can come and help me;
- I will try to use the toilet at break time or at the agreed times;
- I will only use the agreed emergency signal for real emergencies;
- I will tell you if I want you to stay in the room or stay with me in the toilet;
- I will tell you straight away if you are doing anything that makes me feel uncomfortable or embarrassed;
- I will work with you to practice the things I need to do to become more independent in using the toilet.

We will review this agreement on:

Signed: Child (if appropriate) Date:

Signed: Parents Date:

Signed: Key Adult Date:



Appendices 4

Bringing out the Best

Parental Permission for Staff to Provide Intimate Care

I understand that:

- I give permission to the staff to provide appropriate intimate care support to my child e.g. changing soiled clothing, washing and toileting;
- I will advise the Head of School any medical reason my child may have which affects issues of intimate care;
- I understand that the intimate care provided for my child at their school will be given by familiar members of staff;
- I understand that the members of staff providing the care for my child have had appropriate training, including Child Protection.

Parent/Carer Name:

Signature:

Relationship to child:

Date:

Child's Name:

Class:

D.O.B:

Address and contact details:

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Bringing out the Best

RECORD OF INTIMATE CARE INTERVENTION

Child's Name:

DOB:

Name of Support Staff Involved:

Date	Time	Procedure	Staff Signature	Second Signature