



INTIMATE CARE POLICY

1.0 Purpose of this Policy Aims

The aims of this policy and associated guidance are:

- To safeguard the rights and promote the welfare of children and young people.
- To provide guidance and reassurance to staff whose contracts include intimate care.
- To assure parents and carers that staff are knowledgeable about personal care and that their individual concerns are taken into account.
- To remove barriers to learning and participation, protect from discrimination, and ensure inclusion for all children and young people as pupils and students.

2.0 Definition of intimate care

Intimate care can be defined as care tasks of an intimate nature, associated with bodily functions, bodily products and personal hygiene, which demand direct or indirect contact with, or exposure of, the sexual parts of the body. Help may also be required with changing colostomy or ileostomy bags, managing catheters, stomas or other appliances. In some cases, it may be necessary to administer rectal medication on an emergency basis. The Pond Meadow Administration of Medicines policy (which incorporates the Surrey guidance on The Administration of Medicines) is in place to support staff and children and young people where these tasks are required.

Intimate care tasks specifically identified as relevant include:

- Dressing and undressing (underwear)
- Helping a pupil or student to use the toilet
- Changing continence pads (faeces)
- Changing continence pads (urine)
- Showering
- Washing intimate parts of the body
- Changing sanitary wear
- Inserting pessaries

3.0 Definition of personal care

Personal care generally carries more positive perceptions than intimate care. Although it may often involve touching another person, the nature of this touching is more socially acceptable, as it is less intimate and usually has the function of helping with personal presentation and



hence is regarded as social functioning. These tasks do not invade conventional personal, private or social space to the same extent as intimate care and are certainly more valued as they can lead to positive social outcomes for pupils and students.

Those personal care tasks specifically identified as relevant here include:

- Skin care/applying external medication
- Feeding
- Administering oral medication
- Hair care
- Dressing and undressing (clothing)
- Washing non-intimate body parts
- Prompting to go to the toilet

Personal care encompasses those areas of physical and medical care that most people carry out for themselves but which some are unable to do because of disability or medical need. Children and young people may require help with eating, drinking, washing, dressing and toileting.

This guidance is not prescriptive but is based on the good practice and practical experience of those dealing with such children and young people.

4.0 Basic principles

Children and young people's intimate care needs cannot be seen in isolation or separated from other aspects of their lives. Encouraging them to participate in their own intimate or personal care should therefore be part of a general approach towards facilitating participation in daily life. Intimate care can also take substantial amounts of time but should be an enjoyable experience for the child/young person and for their parents/carer(s). It is essential that every child or young person is treated as an individual and that care is given as gently and as sensitively as possible. The child or young person should be encouraged to express choice and to have a positive image of his or her body.

Staff should bear in mind the following principles:

- Children and young people have a right to feel safe and secure.
- Children and young people have a right to an education and schools have a duty to identify and remove barriers to learning and participation for pupils of all abilities and needs.
- Children and young people should be respected and valued as individuals
- Children and young people have a right to privacy, dignity and a professional approach from staff when meeting their needs.
- Children and young people have the right to information and support to enable them to make appropriate choices.
- Children and young people have the right to be accepted for who they are, without regard to age, gender, ability, race, culture or beliefs.
- Children and young people have the right to express their views and have them heard. Schools must have complaints procedures that children and young people can access.



- A child or young person's Intimate/Personal care plan or Education Health Care Plan should be designed to lead to increased awareness of self and/or independence.

5.0 Vulnerability to abuse

Children and young people with disabilities have been shown to be particularly vulnerable to abuse and discrimination. It is essential that all staff are familiar with the school or settings Safeguarding/Child Protection and procedures, with agreed procedures within this policy and with the child or young person's own Care plan.

The following are factors that increase the child or young person's vulnerability:

- Children and young people with disabilities often have less control over their lives than is normal.
- They do not always receive sex and relationship education, or if they do, may not fully understand it, and so are less able to recognise abuse.
- Through residential, foster or hospital placements, they have multiple carers.
- Differences in appearance, disposition and behaviour may be attributed to the child or young person's disability rather than to abuse.
- They are not always able to communicate what is happening to them.

Intimate care may involve touching the private parts of the child or young person's body and therefore may leave staff more vulnerable to accusations of abuse. It is unrealistic to eliminate all risk but this vulnerability places an important responsibility on staff to act in accordance with agreed procedures.

6.0 Working with parents and carers

Establishing effective working relationships with parents/carers is a key task for all schools and is particularly necessary for children and young people with specific care needs or disabilities. Parents and carers should be encouraged and empowered to work with professionals to ensure their son or daughter's needs are properly identified, understood and met. They should be made welcome, and given every opportunity to explain their son or daughter's care in school or early years setting, or for making teaching staff disability aware. They should be closely involved in the preparation of Individual Support Plans (ISP's) and Health Care Plans. Staff have a duty to remove barriers to learning and participation for pupils and students of all abilities and needs. Plans for the provision of Intimate or personal care must be clearly recorded to ensure clarity of expectations, roles and responsibilities. Records should also reflect arrangements for ongoing and emergency communication between home and school, monitoring and review. It is also important that the procedure for dealing with concerns arising from personal care processes is clearly stated and understood by parents and carers and all those involved.



7.0 Good practice guidance

At Pond Meadow, class staff are involved on a daily basis in providing intimate or personal care to children and young people with special educational needs arising from learning difficulties, sensory impairments, medical needs and physical impairments. This places those staff in a position of great trust and responsibility. They are required to attend to the safety and comfort of the children and young people and to ensure that they are treated with dignity and respect. The time taken to carry out this care can also be used to promote personal development, as even the youngest child can be encouraged to become aware of and value their own body and extend their personal and communication skills. If such opportunities are denied then they may not learn to distinguish between appropriate and inappropriate. Confident and self-assertive children and young people who feel their bodies belong to them are less vulnerable to sexual abuse.

Religious and cultural values must always be taken into account when making arrangements for managing intimate and personal care needs for children and young people, and stereotypes should be challenged. Staff concerned should begin by simply asking questions about the child or young person being supported and try to discover things about their background and experience.

8.0 Cross gender care

There is positive value in both male and female staff being involved in intimate and personal care tasks, although it may be unacceptable to some parents, carers, or the child or young person, to have a carer of the opposite sex, to attend to toileting or other intimate needs, and this should be respected. However, at times there may be exceptional circumstances where there are human resource implications preventing full consideration to the optimum gender balance (available carers are more likely to be female).

It is vital that schools and settings meet with parents and carers and the child or young person prior to enrolment, to discuss the care plan and staff mostly likely to be involved in providing the intimate or personal care aspects.

9.0 Examples of positive approaches

Examples of positive approaches to intimate or personal care which ensure a safe and comfortable experience for the child or young person:

- Get to know the child or young person beforehand in other contexts to gain an appreciation of his or her mood and system of communication.
- Have a knowledge of and respect for any cultural or religious sensitivities related to aspects of intimate care.
- Speak to the child or young person and ensure they are aware of the focus of the activity. Address the child or young person in age appropriate ways.
- Give explanations of what is happening in a straightforward and reassuring way.



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- Agree terminology for parts and bodily functions that will be used by staff and encourage children and young people to use these terms appropriately.
- Respect a child or young person's preference for a particular sequence of care.
- Give strong clues that enable the child or young person to anticipate and prepare for events, for example show the clean nappy/pad to indicate the intention to change, or the sponge or flannel for washing.
- Encourage the child or young person to undertake as much of the procedure for themselves as possible, including washing intimate areas and dressing/undressing.
- Seek the child or young person's permission before undressing if he or she is unable to do this unaided.
- Provide facilities that afford privacy and modest.
- Keep records noting responses to intimate care and any changes of behaviour.

10.0 Practical considerations for managers and supervisors

Practical considerations for managers and supervisors to ensure health and safety of staff and to children or young people.

- All adults assisting with intimate or personal care will be employees of Pond Meadow. This aspect of their work should be reflected in the job description.
- Staff should receive training in good working practices which comply with Health and Safety regulations such as dealing with bodily fluids, manual handling, Child Protection, HIV and Infection, whistle blowing and risk assessment. Identified staff should also receive training for very specific intimate care procedures where relevant.
- Where a routine procedure needs to be established, there should be an agreed care plan involving discussion with school staff, parents or carers, relevant health personnel and the child or young person, as appropriate. All parties should sign the plan. The plan will be reviewed on a regular basis. Pond Meadow's complaints procedures should be known to all, and followed where necessary.