

1. Introduction

This Intimate Care Good Practice guidance has been developed to safeguard disabled children, young people and all staff and volunteers. Disabled children and young people can be especially vulnerable. Staff and volunteers involved in their intimate care need to be sensitive to the child or young person's individual needs. This Intimate Care Policy and Guidelines should be read in conjunction with the Swindon Safeguarding Partnership document 'Disabled Children and Young people Intimate Care Good Guidance for all staff and volunteers working with disabled children and young people.'

2. Definition

Intimate care may be defined as any activity required to meet the personal care needs of each individual child or young person.

Intimate care can include:

- Oral Care
- Feeding
- Washing
- o Dressing
- o Menstrual Care and Sexual Health
- First aid and treatment such as suppositories, enemas and enteral feeds
- Catheter and stoma care
- Supervision of a child or young person involved in intimate self-care

Parents and carers have a responsibility to advise staff and volunteers of the intimate care needs of the child or young person and keep staff and volunteers up to date in changes in a child or young person's needs.

3. Principles of Intimate Care

The following are the fundamental principles of intimate care upon which the Policy and Guidelines are based:

- Every child and young person has the right to be involved and consulted in their own intimate care to the best of their abilities
- Every child and young person has the right to be safe
- Every child and young person has the right to personal privacy
- Every child and young person has the right to be valued as an individual
- Every child and young person has the right to be treated with dignity and respect
- Every child and young person has the right to express their views on their own intimate care and to have such views taken into account
- Every child and young person has the right to have consistent levels of intimate care



 Staff should only be under taking intimate care activities they understand and feel competent and confident to carry out and where necessary received the relevant training

4. School Responsibilities

- Robert Le Kyng School will ensure all staff and volunteers are employed following safer recruiting process.
 - Approval includes:
 - o CRB or DBS checks and reference checks
 - Approval of the head teacher
- Only named staff approved by Robert Le Kyng School or an appropriately trained person agreed by the Head teacher should undertake intimate care of children and young people while they are placed with Robert Le Kyng School.
- Robert Le Kyng School must ensure that all staff and volunteers undertaking the intimate care of children and young people are familiar with and understand the Intimate Care Policy and Guidelines together with associated policies and procedures.
- Intimate care arrangements must be agreed by Robert Le Kyng School, parents/carer and child or young person (if appropriate). This includes:
 Risk of contact with Body Fluids To protect the child and school staff, this process should always involve the use of plastic gloves/aprons. All waste should be disposed of with care. Staff involved in these procedures should adhere to the safe system of care.
 - Hand washing facilities Hand washing facilities must be available, staff should follow Swindon Borough Council hand washing guidelines. Disposable gloves / aprons Soiled gloves and aprons should be disposed of in a clinical waste bin where possible or double bagged before disposing into domestic waste.

Disposal of waste - Extremely soiled underwear can be disposed of and should be put into a clinical waste bin where possible or double bagged before disposing into domestic waste. However, lightly soiled underwear can be double bagged and sent home for cleaning/disposal. Any other soiled clothes can also be double bagged and send home with the child unless the soiling is extreme in which case call parents for advice.

Personal Hygiene - Parents <u>will provide</u> flushable wet wipes and extra changes of underwear, nappy bags and carrier bags.

A written record should be kept of incidences of incontinence that requires the appropriate support staff to help to clean the genital area. For convenience a log should be kept in the shower / changing room. (Appendix 1)

 Intimate care arrangements must be recorded in the child or young person's profile or care plan and consent forms signed by the person with parental responsibility. (Appendix 2)



- If changes are required to intimate care these must be recorded in the diary sheets and the care plan updated at the earliest opportunity.
- If some one, in the case of an emergency, has to provide intimate care other than the named Staff and volunteers or parent(s) then the Senior staff member should be notified of the arrangement as soon as possible.
- Intimate care arrangements should be reviewed annually or as required.
 The views of all relevant parties, including the child or young person (if appropriate) should be sought and considered to inform future arrangements.
- If anyone involved with the child or young person (including the child or young person) has concerns about the appropriateness of any intimate care then Child Protection Guidelines should be followed.

5. Guidelines for Good Practice

All Robert Le Kyng staff and volunteers need to be aware that some adults may use intimate care as an opportunity to abuse children and young people. Some tasks/treatments can be open to misinterpretation so adhering to these guidelines of good practice is aimed at safeguarding children, young people staff and volunteers.

5.1. Involve children and young people in their intimate care

Try and encourage a child or young person's independence as far as possible in his/her intimate care. Where the child or young person is fully dependent talk to them about what is going to be done and give them choice where possible. Check your practice by asking the child or young person re any likes or dislikes while carrying out intimate care and when ever possible gain verbal consent.

5.2. Treat every child or young person with dignity and respect and ensure privacy appropriate to their age and situation

Intimate care is often carried out by one person alone with one child. The practice of providing one to one intimate care of a child alone is supported. If the activity requires two persons for the greater comfort or safety of the child or young person then this should be explicit in the care plan.

5.3. Make sure practice in intimate care is consistent

As a child or young person can have several carers a consistent approach is essential. Effective communication between children or young people/staff/parents/ ensures practice is consistent.



Staff and volunteers should only carry out care activities they understand and feel competent and confident to do so and when necessary have received the appropriate training. If in doubt ask. Some procedures must only be carried out by Staff and volunteers who have been formally trained and assessed e.g. tube feeding, rectal diazepam.

5.5. Promote positive self-esteem and body image

Confident, self-assured children and young people who feel their body belongs to them are less vulnerable to sexual abuse. The approach Staff and volunteers take to intimate care can convey lots of messages to a child or young person about their body worth. A Staff and volunteers attitude to a child or young person's intimate care is important.

5.6. If you have any concerns

If you observe any unusual markings, discolorations or swelling including in the genital area, record and then report immediately and **only** to Robert Le Kyng's School designated Safeguarding Lead or Deputy Safeguarding Lead.

If during intimate care a child or young person is accidentally hurt or a child or young person appears to be sexually aroused by your actions, or misunderstands or misinterprets something, reassure them, ensure their safety and record and then report the incident immediately to Robert Le Kyng's School designated Safeguarding Lead or Deputy Safeguarding Lead .

Record and report any unusual emotional or behavioural response by the child or young person to intimate care. A written record of concerns should be kept.

6. Giving Intimate Care to Children and Young People of the Opposite Sex 6.1 Principles:

There is a positive value in both male and female staff being involved with children and young people.

Ideally, every child or young person should have a choice of the member staff for all their intimate care.

The individual child or young person's safety, dignity and privacy are of paramount importance.

The practice guidelines set out below, are written in the knowledge that the current ratio of female to male staff means we are unlikely to be able to offer the same sex staff member to male children and young people.

6.2 Intimate Care

Wherever possible, boys and girls should be offered the choice of gender of the staff member if intimate care is required, this becomes of increasing importance as the child reaches puberty.



Intimate care of boys/girls can be carried out by a staff member of the opposite sex with the following provisions:

- When intimate care is being carried out all children or young people have the right to dignity and privacy i.e. they should be appropriately covered, the door closed or screens/curtains in place.
- If the child or young person appears distressed or uncomfortable when personal care tasks are being carried out, the care should stop immediately. The staff member should try and ascertain why the child is distressed and provide reassurance.
- Concerns must be reported to the designated safeguarding lead

7. Communication with Children and Young People

It is the responsibility of all Staff caring for a child or young person to ensure that they are aware of the child or young person's method and level of communication. Children and young people communicate using different methods e.g. words, signs, symbols, body movements, eye movements.

To ensure effective communication:

- Ascertain how the child or young person communicates prior to undertaking any personal care
- Make eye contact at the child or young person's level
- Use simple language and repeat if necessary
- Wait for responses
- Continue to explain to the child or young person what is happening even if there is no response
- Treat the child or young person with dignity and respect at all times

References

Swindon LSCB web site –www.swindonlscb.gov.uk

- Additional Guidance for Safeguarding Disabled Children.
- Guidance for Safer Working practice for adults who work with children and young people(DCSF Nov 2007 updated Sept 2013)
- Children with Learning Disabilities Continence Assessment- (under review)

Written by: Michelle Fisher Date: January 2023

Next Review: January 2024



Appendix 1

Dear Parent

In order to allow school staff to assist with your child's personal care, please read the school's intimate care policy. If you are happy with the policy, please sign and date it, then return it to the school office.

Risk of contact with Body Fluids - To protect the child and school staff, this process should always involve the use of plastic gloves/aprons. All waste should be disposed of with care. Staff involved in these procedures should adhere to the safe system of care advised by Swindon Borough Council.

Hand washing facilities - Hand washing facilities must be available, staff should follow Swindon Borough Council hand washing guidelines.

Disposable gloves / aprons - Soiled gloves and aprons should be disposed of in a clinical waste bin where possible or double bagged before disposing into domestic waste.

Disposal of waste - Extremely soiled underwear can be disposed of and should be put into a clinical waste bin where possible or double bagged before disposing into domestic waste. However, lightly soiled underwear can be double bagged and sent home for cleaning/disposal. Any other soiled clothes can also be double bagged and send home with the child unless the soiling is extreme in which case call parents for advice.

Personal Hygiene - Parents <u>will</u> provide flushable <u>wet wipes</u> and <u>extra changes of</u> underwear, nappy bags and carrier bags.

A written record should be kept of incidences of incontinence that requires the appropriate support staff to help to clean the genital area. For convenience a log should be kept in the shower / changing room.

I understand that in the event of my child being incontinent, appropriately trained school staff will be required to have intimate contact in the process of cleaning him/her. I accept that this is a service that the school is not obliged to undertake. I understand that it may be necessary to dispose of soiled underwear and I am required to provide flushable wet wipes, nappy bags, carrier bags and extra changes of underwear/clothes as required.

Please be advised that the school may need to enter this information onto a secure internal database, in order to ensure that all staff have access to your Child's needs while he/she is in school.

Child's Name :	D.O.B
Parent/carer name :	
Signature :	Date :



Appendix 2

Record sheet for the delivery of Intimate Care

TOILET RECORD for

Please write time & sign (include initials of second person where appropriate)

Date	Morning	Lunchtime	2	Afternoon	