

# Intimate Care Policy

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## 1.0 Policy statement

The Dixons Academies Trust takes seriously its 'duty to safeguard and promote the welfare of pupils at the school' (Children Act 1989 and Education Act 2004). The welfare of the child is paramount and we adhere to all aspects of Keeping Children Safe in Education (September 2018) and Working Together to Safeguard Children (2018). Nothing is more important than children's welfare and we will always work in the best interests of the child. All children must have equal rights to protection. All children in our academies have a right to be safe and treated with dignity and respect at all times to enable them to access all aspects of the curriculum and to progress and develop.

## 2.0 Scope and purpose

2.1 This policy sets out clear guidelines on supporting intimate care with specific reference to toileting. This policy should be read in conjunction with other DAT policies including:

- Child Protection and Safeguarding Policy
- Health and Safety policy
- Professional Conduct policy
- Special Educational Needs Report

2.2 The aims of this policy and associated guidance are:

- to provide guidance and reassurance to staff
- to safeguard the dignity, rights and wellbeing of children and young people
- to enable all staff to be aware of and deal sensitively with, the need for assistance with intimate care
- to ensure all staff understand that safeguarding is everyone's responsibility

2.3 Dixons Academies Trust will ensure that:

- no child's physical, mental or sensory impairment will have an adverse effect on their ability to take part in day to day activities
- no child with a named condition that affects personal development will be discriminated against
- no child who is delayed in achieving continence will be refused admission
- no child will be sent home or have to wait for their parents / carer due to incontinence
- adjustments will be made for any child who has delayed continence

2.4 This policy has due regard to relevant legislation and guidance, in:

- Keeping Children Safe in Education (2019)
- The Statutory Framework for the Early Years Foundation Stage (2017)
- The Children and Families Act (2014)
- The Education Act (2011)
- The Equality Act (2010)
- Health Act (2006)

## 4.0 Practice

'Intimate care tasks' cover any tasks that involve the dressing and undressing, washing including intimate parts, helping someone use the toilet, changing incontinence pads or carrying out a procedure that requires direct or indirect contact to an intimate personal area.

'Intimate care plans' are required for students who have additional needs.

## 5.0 Partnership with parents / carers

5.1 Staff at all our academies work in partnership with families to provide care appropriate to the needs of the individual child and together will produce a care plan for those children with additional needs. The care plan will set out:

- prior permission must be obtained from parents of students with additional needs before intimate care procedures can be carried out
- parents are empowered and encouraged to work with staff to ensure their child's needs are identified, understood and met
- what care is required
- number of staff needed to carry out the task (if more than one person is required, reason will be documented)
- additional equipment required
- child's preferred means of communication (e.g. visual, verbal). Agree terminology for parts of the body and bodily functions



- child's level of ability, i.e. what tasks they are able to do by themselves, and opportunities for developing independence are taken
- acknowledgment and respect for any cultural or religious sensitivities related to aspects of intimate care
- arrangements for transport and trips are taken into account
- be regularly monitored and reviewed in accordance with the child's development

5.2 Parents / carers are asked to supply the following:

- spare incontinence pads (nappies, pads, 'pull-ups')
- wipes, creams, waste disposal sacks etc.
- spare clothes
- spare underwear

5.3 The academy will supply the following:

- accessible but private hygiene suite facility
- hand washing facilities
- appropriate waste disposal (bin with foot operated lid)
- gloves

## 6.0 Staffing

- 6.1 Collaboration between parent / carers and staff in writing the care plan will strive to ensure all parties feel confident that best practice is being achieved and avoid potentially stressful areas of anxiety and conflict. All staff undertaking intimate care will, in line with standard recruitment and selection processes, have enhanced DBS certification, relevant training and support and be familiar with the individual care plan.
- 6.2 Trained staff should be available to substitute and provide intimate care if the usual staff member is not available. No staff member can be required to provide intimate care and, as such, intimate care will only be provided by those who have specifically indicated a willingness to do so.
- 6.3 Staff who provide intimate care should do so in a caring way; every child has the right to be treated with respect and dignity.

## 7.0 Best practice

- 7.1 When intimate care is given, the member of staff explains fully each task that is carried out, and the reason for it. Staff encourage children to do as much for themselves as they can, lots of praise and encouragement will be given to the child when they achieve this.
- 7.2 All staff working in early years settings must have an enhanced DBS certificate. Particular staff members are identified to change a child with known needs; they plan and record their work with that child.

## 8.0 Safeguarding

- 8.1 Staff are trained on the signs and indicators of child abuse which in line with the guidance provided by Keeping Children Safe in Education (2019) and the academy Child protection policy.
- 8.2 If a member of staff is concerned about any physical or emotional changes, such as marks, bruises, soreness, distress etc. they will inform the Designated Safeguarding Lead immediately. The Child Protection policy will then be implemented.
- 8.3 Should a child become unhappy about being cared for by a particular member of staff, the Designated Safeguarding Lead will look into the situation and record any findings. These will be discussed with the child's family in order to resolve the problem. If necessary the academy will seek advice from other agencies.
- 8.4 If a child makes an allegation against a member of staff, the procedure set out in the Safeguarding Policy will be followed.

## 9.0 Dealing with body fluids

- 9.1 Urine, faeces, blood and vomit will be cleaned up immediately and disposed of safely. When dealing with body fluids, staff wear protective clothing (disposable plastic gloves and aprons) and wash themselves thoroughly afterwards. Soiled children's clothing will be bagged to go home (staff will not rinse it). Children will be kept away from the affected area until the incident has been completely dealt with.
- 9.2 All staff maintain high standards of personal hygiene, and will take all practicable steps to prevent and control the spread of infection.
- 9.3 This policy aims to manage risks associated with toileting and intimate care needs and ensures that employees do not work outside the remit of their responsibilities set out in this policy.



## 10.0 Intimate care plan

To be completed by the SENDCo and parent / carer of any student with additional needs for whom intimate care is being provided by all our academies. The academy will not provide intimate care unless you complete and sign this form, in accordance with the guidelines set out in the Individual Needs policy.

*Please complete in block letters*

Review date / staff member	
Name of school / setting	
Name of child	
Date of birth	
Class	

Child's identified intimate care need

Projected outcome for this care plan Review:

Identified level of support (tick appropriate level)

Oversight	<input type="checkbox"/>	Prompts	<input type="checkbox"/>	1:1	<input type="checkbox"/>	2:1	<input type="checkbox"/>
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Description of support required (step by step):

Child will try to:	Staff will:	Parent / carer will:

Completed by:		Signature:		Date:	
Completed by:		Signature:		Date:	
Completed by:		Signature:		Date:	

