



Policy for **INTIMATE CARE**

Reviewed: April 2017



WICKERSLEY
PARTNERSHIP
TRUST.

INTIMATE CARE

Intimate care is defined as tasks of an intimate nature, associated with bodily functions, body products and personal hygiene, demanding direct or indirect contact with or exposure of the genitals. Examples include care associated with continence and menstrual management as well as more ordinary tasks such as help with washing or bathing.

Aston Lodge School is committed to ensuring that all staff undertake the intimate care duties in a professional manner at all times. We recognise the need to treat all children with respect when intimate care is given and that no child should be attended to in a way that causes distress or pain.

All staff who support children with intimate care are required to obtain an Enhanced Disclosure & Barring service Check. No-one is allowed to be on their own with children until this is received.

Children's dignity will be preserved and a high level of privacy, choice and control will be provided to them. Staff who provide intimate care to children have a high awareness of child protection issues. Staff behavior is open to scrutiny and staff at Aston Lodge School work in partnership with parents/carers to provide continuity of care wherever possible.

Staff deliver a full personal safety curriculum, as part of Personal, Social and Health Education to all children, appropriate to their developmental level and degree of understanding. This work is shared with parents who are encouraged to reinforce the personal safety messages within the home.

OUR APPROACH TO BEST PRACTICE

All children who require intimate care are treated respectfully at all times; the child's welfare and dignity is of paramount importance.

Staff who provide intimate care are trained to do so (including Child Protection and Health and Safety training in moving and handling) and are fully aware of best practice.

Apparatus will be provided to assist with children 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 children taking into account developmental changes, eg onset of puberty/menstruation. Wherever possible staff who are involved in the intimate care of children will not usually be involved with the delivery of sex and relationship education to this child as an additional safeguard to both staff and children/young people involved.

There is careful communication with each child who needs help with intimate care in line with their preferred means of communication (verbal, symbolic, etc.) to discuss the child's needs and preferences. The child is aware of each procedure that is carried out and the reasons for it.

Staff will encourage each child to do as much for themselves as they can. This may mean, for example, giving the child responsibility for washing themselves. Individual intimate care plans will be drawn up for particular children as appropriate to suit the circumstances of the child.

Each child's right to privacy will be respected. Careful consideration will be given to each child's situation to determine how many carers might need to be present when a child needs help with intimate care. It is usual for one child to 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. Wherever possible the same child will not be cared for by the same adult on a regular basis; there will be a rota of carers known to the child who will take turns in providing care. This will ensure that over-familiar relationships are discouraged from developing, while at the same time guarding against the care being carried out by a succession of completely different carers.

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 on the child's care plan. The needs and wishes of children and parents will be carefully considered alongside any possible constraints; e.g. staffing and equal opportunities legislation.

Intimate care is recorded on the intimate care log. This includes, name of child, date, time, nature of the care e.g. nappy change or change after an accident, member of staff's name. The log will be countersigned. Parents should be informed at the end of the session.

Nappy changing procedure:

- Ensure changing unit and area is clean
- Have nappy and wipes to hand
- Put on disposable gloves
- Clean and change child as appropriate to their individual's needs
- Dispose of nappy in bins provided.
- Clean area with anti-bacterial spray and wash hands thoroughly.

Wet clothes changing procedure:

- Ensure changing area is clean
- Have wipes and clean clothes to hand
- Put on disposable gloves
- Settle child in area
- Encourage child where possible to remove own clothes, wipe and dry self and re dress.
- Place wet clothes in bag to take home.
- Clean area with anti-bacterial spray and wash hands thoroughly.

THE PROTECTION OF CHILDREN

Education Child Protection Procedures and Inter-Agency Child Protection procedures will be accessible to staff and adhered to.

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

If a member of staff has any concerns about physical changes in a child's presentation, e.g. marks, bruises, soreness etc. s/he will immediately report concerns to the appropriate manager/ designated person for child protection. A clear record of the concern will be completed following the school's safeguarding procedure and reported to the DSL.

If a child 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 child's needs remain paramount. Further advice will be taken from outside agencies if necessary.

If a child makes an allegation against a member of staff, all necessary procedures will be followed (see Safeguarding policy)

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