



# Intimate Care Policy

<b>Person Responsible:</b>	Mrs H Mukherjee	<b>Frequency of Review:</b>	2 Year
<b>Authorisation By:</b>	Headteacher	<b>Notice Date:</b>	31/10/2019
<b>Authorisation Date:</b>	30/11/2017	<b>Review Due By:</b>	30/11/2019

## 1 Introduction

This policy represents the agreed principles for intimate care throughout the school.

The purpose of this policy is:

- To safeguard the rights and promote the best interests of the students
- To ensure students are treated with sensitivity and respect, and in such a way that their experience of intimate care is a positive one
- To safeguard adults required to operate in sensitive situations
- To raise awareness and provide a clear procedure for intimate care
- To inform parents/carers in how intimate care is administered
- To ensure students and their parents/carers are consulted in the intimate of care of their children

## 2 Principles

It is essential that every student is treated as an individual and that care is given as gently and as sensitively as possible. Care and physical contact should take into account the age, developmental level, gender and situation of the student. As far as possible, students should be allowed to exercise choice and should be encouraged to have a positive image of his/her own body. Given the right approach, intimate care can provide opportunities to teach students about the value of their own bodies, to develop their safety skills and to enhance their self-esteem. Parents and staff should be aware that matters concerning intimate care will be dealt with confidentially and sensitively and that the student's right to privacy and dignity is maintained at all times.

## 3 Definition of Intimate Care

Intimate Care is defined as enabling students to carry out or be involved in personal life functions with dignity and respect, meeting individual needs.

Intimate care can include the following:

- Toileting
- First Aid
- Changing students for swimming / PE
- Dressing
- Feeding
- Moving students including physiotherapy
- Administering medication
- Personal hygiene e.g. menstruation
- Providing physical comfort and support

## 4 Strategies

1. The induction given to new staff covers the Child Protection Policy and arrangements, general health, safety and security information, lifting and moving training, intimate care and personal hygiene arrangements.
2. All staff have a responsibility to familiarise themselves with students' individual needs, follow these and review / update them at least annually
3. Intimate care tasks must not be attempted unless the member of staff is sure about how to proceed. If in doubt, ask a colleague.
4. Intimate care tasks should be seen as an important part of the individual's curriculum and should include building a student's independence where appropriate.
5. This should be seen as quality time with individuals, focusing on communication, increasing independence and raising self-esteem.
6. It is important that privacy, dignity and confidentiality are maintained at all times. Adults should be sensitive to students' feelings and wishes, introducing age appropriate strategies in consultation with home and relevant outside agencies if appropriate.
7. Intimate care procedures should take place in designated areas ensuring privacy.
8. The environment should be clean, pleasant, hygienic and relaxing. Appropriate resources should be available.
9. Health and hygiene procedures should always be followed, e.g. use of gloves, hand washing, safe disposal of waste, wiping down of surfaces, etc.
10. In certain situations, individual Intimate Personal Care Plans and Feeding Plans will be identified for specific pupils. Review of the Care Plan will be required (at least annually).
11. Links with the home are essential to maintain continuity and consistency of practice.
12. Contact with outside agencies needs to be maintained where appropriate
13. Risk assessments should highlight the potential for abuse / accusation of abuse during intimate care procedures. Appropriate staffing will be determined by risk assessment. Staff must be familiar with and follow the Child Protection Policy and guidelines.
14. Evidence of soreness, irritation, bruising, scratches, and discharge, etc need to be recorded and reported to parents.
15. Where signs or symptoms of a suspicious nature concern staff, it should be reported immediately to the DSP as cited in the Child Protection Policy.
16. In cases where students are sexually aroused or students have emotional reactions during intimate care procedures, this must be identified on their individual care plan and strategies / arrangements agreed with parents / carers.
17. If staff feel that a student is using a caring situation inappropriately, all those involved need to discuss the situation to determine an outcome in consultation with parents/carers
18. Administering medication and incidents related to First Aid must follow the appropriate guidelines (Individual Health Care Plan).
19. Staffing levels for swimming / PE activities should enable staff to change in privacy and be adequate to meet any identified risk assessments.
20. For offsite situations, staff must ensure that appropriate facilities are available, prior to the visit and take a portable hoist if required.

## 5 Lifting and Handling

All students who need lifting / handling have a Moving and Handling Plan. These must be followed at all times and are reviewed annually.

## **6 Safeguards for children**

All staff at Upper Wharfedale School are DBS checked on application and cannot undertake tasks within school until all checks are completed satisfactorily.

It is not appropriate for volunteers to carry out intimate care procedures.

## **7 Related School Policies**

Child Protection/Safeguarding

Sex and Relationships

Health and Safety

Behaviour

Restrictive Physical Intervention

Medical

Drugs on School Premises

SEN

Supporting Students With Medical Conditions

Single Equality Scheme