



King's Academy Ringmer

“in pursuit of excellence”

Intimate Care Policy

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1. Introduction

This Intimate Care Policy has been developed to safeguard students, support staff and ensure good practice is followed. At King's Academy Ringmer, all staff are checked with the Disclosure and Barring Service (DBS) and we are committed to ensuring that all staff responsible for the intimate care of students will undertake their duties in a professional manner at all times. We believe that the intimate care of students cannot be separated from other aspects of their learning and development and we believe that every student has the right to feel safe and secure. We do not discriminate against students who have not reached a stage where they can manage their own personal hygiene and as such welcome all students to participate in our school and provide appropriate support for each student on an individual basis. We recognise the need to treat all students with respect and dignity when intimate care is given. No student should be attended to in a way that causes distress, embarrassment or pain.

We aim to:

- Safeguard the rights and promote the welfare of all children and young people including those who may be more vulnerable to abuse.
- Provide guidance and reassurance to staff whose duties may include intimate care.
- Assure parents and carers that staff are knowledgeable about personal care and that their individual needs and concerns are taken into consideration.
- Remove barriers to learning and participation, protect from discrimination and ensure inclusion for all children and young people within our setting.

2. Definition

Intimate care is any care which is associated with invasive procedures relating to bodily functions, bodily products and personal hygiene which demands direct or indirect contact with or exposure of intimate parts of the body, such as cleaning up after a student who has soiled themselves. In addition, some students may need help with dressing/undressing or using the toilet. Most students can carry out these functions themselves but it is recognised that some are unable to due to

physical disability, learning difficulties, medical needs or needs arising from the student's stage of development.

3. Our Approach to Best Practice

The management of all students with intimate care needs will be carefully planned. The student who requires intimate care is treated with respect at all times; the student's welfare and dignity is of paramount importance.

Individual intimate care plans will be drawn up for particular students as appropriate to suit the circumstances of the student.

Where these procedures may require specialist training, we will seek out training for the staff who will be involved in a student's care, ensuring that the student's key-person and at least one other member of staff accesses the training

Staff will be supported to adapt their practice in relation to the needs of individual students taking into account developmental changes such as the onset of puberty and menstruation. Wherever possible, staff involved in the intimate care of students will not usually be involved with the delivery of sex education to the children in their care as an additional safeguard to both staff and students involved.

Where possible the student's key-person is responsible for undertaking their care. When this is not possible, a staff member who is known to the student will take on that responsibility. The staff member who is involved will always ask the student for permission to assist them. The student will be supported to achieve the highest level of autonomy that is possible given their age and abilities and staff will encourage them to do as much for him/herself as he/she can. Students will be cared for with dignity and respect for their privacy.

Wherever possible staff should only care intimately for an individual of the same sex. However, in certain circumstances this principle may need to be waived where failure to provide appropriate care would result in negligence for example, female staff supporting boys in our school, because of a lack of suitably trained male staff

Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the student's individual health care plan. The needs and wishes of students and parents will be taken into account wherever possible within the constraints of staffing and equal opportunities legislation.

Working with parents/carers

We believe that our partnership with parents/carers is an essential principle in our setting and is particularly necessary in relation to students needing intimate care. We recognise that the information required to carry out intimate care is available from parents/carers and prior permission must be obtained from parents/carers before intimate care procedures are undertaken. We acknowledge that cultural and diversity influences may affect what is deemed 'intimate' and ensure we pay regard to social, ethnic and cultural perspectives through open dialogue with parents/carers.

Parents/carers should be encouraged and empowered to work with staff to ensure that their child's needs are identified, understood and met. This may include Health Care plans and any other plans which identify the support of intimate care where appropriate. Exchanging information with parents/carers is essential through personal contact, telephone or correspondence.

When any intimate care is carried out on students with individual care plans, it will be recorded on their own personal record on Myconcern. All information concerning intimate care procedures is recorded and stored securely.

We appreciate that sometimes students have toileting 'accidents' which are out of character for them. In the event of this, and in the absence of a personal intimate care plan, the student would be fully encouraged and supported to achieve the highest level of autonomy that is possible given their age and ability. Staff will encourage the student to do as much for his/herself as possible and parents/carers will be informed the same day. The parents/carers will be contacted confidentially either in person, by telephone or by email. On the rare occasion that a student is soiled to a point where they are unable to clean themselves to a comfortable state, parents/carers would be contacted immediately so that the student could be taken home for bathing.

4. The Protection of Children

Child Protection Procedures and Multi-Agency Child Protection procedures will be adhered to.

If a member of staff has any concerns about physical changes in a student's presentation, e.g. marks, bruises, soreness etc. s/he will immediately report concerns to the appropriate manager/designated person for child protection.

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

If a student makes an allegation against a member of staff, all necessary Child Protection procedures will be followed(See Child Protection and Safeguarding Policy).

All staff will be required to confirm that they have read the school policy for clarification of practices and procedures.

Allegations of Abuse

Personnel working in intimate situations with students can feel particularly vulnerable. This school policy can help to reassure both staff involved and the parents/carers of vulnerable children. Action will be taken immediately should there be a discrepancy of reports between a child and the personal assistant. Where there is an allegation of abuse, the guidelines in the Child Protection procedures will be followed. If staff are concerned about a student's demeanour during or following intimate care, or has responded to or said something that has caused concern during the intimate care, they will report such incidents immediately to one of the Designated Safeguarding Leads who will follow the correct safeguarding procedures

Health and Safety

Staff should always wear gloves when dealing with a student who is bleeding or soiled. (The school will provide gloves, a bin and liners to dispose of any waste)

Any soiled waste should be placed in a polythene waste disposal bag which can be sealed. This bag should then be placed in a bin (complete with liner) which is specifically designated for the disposal of such waste. The bin should be emptied on a daily basis and it can be collected as part of the usual refuse collection service as this is not classed as clinical waste

Policies

These guidelines should be read in conjunction with policies:

Health and Safety Policy

Child Protection and Safeguarding Policy

Privacy Policy

Complaints Policy

The governing board reviews this policy every two years. The governors may, however, review the policy earlier than this, if the government introduces new regulations, or if the governing board receives recommendations on how the policy might be improved.