



BATTLEDOWN CENTRE FOR CHILDREN & FAMILIES

INTIMATE AND PERSONAL CARE POLICY

September 2022

Approved by:	LAB	Date: 30-9-22
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Last reviewed on:	September 2022
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Next review due by:	September 2023
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Introduction

This policy complies with [statutory safeguarding guidance](#) detailed in KCSIE 2022

Battledown Centre For Children and Families is committed to ensuring that all staff responsible for intimate care of children will always undertake their duties in a professional manner.

This school takes seriously its responsibility to safeguard and promote the welfare of the children in its care.

The Local Advisory Body recognises its duties and responsibilities in relation to the Disability Discrimination Act which requires that any child with an impairment that affects his/her ability to carry out normal day-to-day activities must not be discriminated against.

We recognise that all the children we work with have the right to be safe, to be treated with courtesy, dignity, and respect, and to be able to access all aspects of the education curriculum

No child shall be attended to in a way that causes distress, embarrassment, or pain.

Staff will work in close partnership with parents and carers to share information and provide continuity of care.

2. Definition:

Intimate care is defined as any care which involves washing, touching, or carrying out an invasive procedure that most children and young people carry out for themselves, but which some are unable to do. Disabled pupils may be unable to meet their own care needs for a variety of reasons and will require regular support. 'Intimate Care' can be defined as care tasks of an intimate nature, associated with bodily functions, bodily products, and personal hygiene, which demand direct or indirect contact with, or exposure of, the sexual parts of the body. Help may also be required with changing colostomy or ileostomy bags, managing catheters, stomas, or other appliances. This document makes it clear that teaching staff should be under no obligation to provide nursing care, and the same applies to intimate care.

Intimate care tasks specifically identified as relevant include:

- Dressing and undressing (underwear)
- Helping someone use the toilet
- Changing nappy/continence pads (faeces)
- Changing nappy/continence pads (urine)
- Bathing/ showering
- Washing intimate parts of the body

'Personal Care' generally carries more positive perceptions than intimate care.

Although it may often involve touching another person, the nature of this touching is more socially acceptable, as it is less intimate and usually has the function of helping with personal presentation and hence is regarded as social functioning. These tasks do not invade conventional personal, private, or social space to the same extent as intimate care and are certainly more valued as they can lead to positive social outcomes for people.

Those personal care tasks specifically identified as relevant here include:

- Skin care/applying external medication (with consent from Parents/Carers)

- Feeding – with guidance from SaLT if necessary
- Administering oral medication (with consent from Parents/Carers) – **see Supporting Pupils with Medical Conditions Policy**
- Hair care – (with consent from Parents/Carers)
- Dressing and undressing (clothing)
- Washing non-intimate body parts
- Prompting to go to the toilet

Personal care encompasses those areas of physical and medical care that most people carry out for themselves but which some are unable to do because of disability or medical need. Children and young people may require help with eating, drinking, washing, dressing and toileting. This guidance is not prescriptive but is based on the good practice

Our approach to best practice:

- The management of all children with intimate care needs will be carefully planned.
- Staff who provide intimate care are trained to do so (including Child Protection, Moving, and Handling, where appropriate) and are fully aware of best practice.
 - Where specialist equipment and facilities are required above that currently available in the school, every effort will be made to provide appropriate facilities in a timely fashion, following assessment by a Physiotherapist and/or Occupational Therapist.
 - There is careful communication with any pupil who requires intimate care in line with their preferred means of communication to discuss needs and preferences.
- Staff will be supported to adapt their practice in relation to the needs of individual pupil considering developmental changes such as the onset of puberty and menstruation.
- Pupils will be supported to achieve the highest level of independence possible, according to their individual condition and abilities
- Individual care plans may be drawn up for any pupil requiring regular intimate care
- Careful consideration will be given to individual situations to determine how many adults should be present during intimate care procedures. Where possible one pupil will be cared for by one adult unless there is a sound reason for having more adults present. In such a case, the reasons will be documented.
- Intimate care arrangements will be discussed with parents/carers on a regular basis and may be recorded on the care plan
- The needs and wishes of pupils and parents will be considered wherever possible, within the constraints of staffing and equal opportunities legislation

Child Protection:

The Governors and staff of Battledown Centre for Children and Families recognise that disabled children are particularly vulnerable to all forms of abuse. Child Protection and Multi-Agency Child Protection procedures will be always adhered to.

If a member of staff has any concerns about physical changes in a child's presentation (unexplained marks, bruises, or soreness, for example) s/he will immediately report concerns to the Designated Safeguarding Lead.

If a child becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be investigated at an appropriate level and outcomes recorded.

Parents/carers will be contacted at the earliest opportunity as part of the process of reaching a resolution. Further advice will be taken from partner agencies.

If a pupil makes an allegation about a member of staff this will be investigated in accordance with agreed procedures detailed in the Safeguarding Children Policy.