



Queen Elizabeth High School

Intimate Care Policy

Ysgol Uwchradd Y Frenhines Elisabeth

Moving Forward Together

Full Governing Body

Date established by Governing Body: 21st March 2018

Responsible Person — Mrs Lisa Thomas

Designated role — Inclusion Unit Manager

Chair of Governors signature — Helen Starkey

Date — 01/07/ 2021

Next Review — Summer Term 2021

If you require this document in an alternative format please contact -
Email — dpo@qehs.carms.sch.uk



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Policy Version Control

Version	Date	Page	Section	Reason for review	Summary of amendment	Chair of Governor's signature
1	04/07/18	4	2.4	Reference to other school policies needed	School policies listed	Helen Starkey 04/07/2018
1	04/07/18	4&5	3	To include Person Centered and Social Services and Wellbeing (Wales) Act 2014 principles	Five key principles included	Helen Starkey 04/07/2018
1	04/07/18	10	Appendix 3	Home/school agreement for Intimate Care needed	Responsibilities of Parent/Carer and school are specified	Helen Starkey 04/07/2018
2	27/05/21	Cover page	Cover page	Policy review	Name change of responsible person from RSD to LT	Helen Starkey 01/07/2021
2	27/05/21		2.8	Policy review	Addition- "annually"	Helen Starkey 01/07/2021

INTIMATE CARE POLICY

Mission Statement

Ymlaen Gyda'n Gilydd / Forward Together

We strive to:

- Create a happy, safe, supportive and stimulating learning environment
- Value everyone
- Develop everyone's personal, social, emotional health and wellbeing
- Promote relevant academic and vocational skills
- Meet individual needs through an imaginative and flexible approach
- Enable all learners to achieve their full potential

UNCRC United National Convention on the Rights of the Child

- Queen Elizabeth High School places the value and principles of the UNCRC at the heart of all policies
- Queen Elizabeth High School is a Rights Respecting School

1. Definition

1. Intimate care can be defined as any care which involves washing or carrying out a procedure to intimate personal areas which most people usually carry out themselves but some pupils are unable to do because of their young age, physical difficulties or other special needs. Examples include care associated with continence and menstrual management as well as more ordinary tasks such as help with washing, toileting or dressing.
2. It also includes supervision of pupils involved in intimate self-care.

2. Principles

2.1 The Governing Body will act in accordance with Section 175 of the Education Act 2002 and the Welsh Government guidance 'Safeguarding Children in Education' (007/2013) to safeguard and Promote the welfare of pupils* at this school.

*Reference to 'pupils' throughout this policy includes all children and young people who received education at this establishment.

- 2.2 This school takes seriously its responsibility to Safeguard and promote the welfare of the children and young people in its care. Meeting a pupil's intimate care needs is one aspect of safeguarding.
- 2.3 The Governing Body recognises its duties and responsibilities in relation to the Equalities Act 2010 which requires that any pupil with an impairment that affects his/her ability to carry out day-to-day activities must not be discriminated against.
- 2.4 This intimate care policy should be read in conjunction with the schools' policies as below:
- Safeguarding, including pupil protection
 - Whistle-blowing policy for school staff
 - Health, safety and security
 - Inclusion Policy including ALN
 - Administration of Medicines
 - Equality and diversity
 - Manual handling
- 2.5 The Governing Body is committed to ensuring that all staff responsible for the intimate care of pupils will undertake their duties in a professional manner at all times. It is acknowledged that these adults are in a position of great trust.
- 2.6 We recognise that there is a need to treat all pupils, whatever their age, gender, disability, religion, ethnicity or sexual orientation with respect and dignity when intimate care is given. The pupil's welfare is of paramount importance and his/her experience of intimate and personal care should be a positive one. It is essential that every pupil is treated as an individual and that care is given gently and sensitively; no pupil should be attended to in a way that causes distress or pain.
- 2.7 Staff will work in close partnership with parents/carers and other professionals to share information and provide continuity of care.
- 2.8 Parental consent is sought via Health Care Plan consent forms annually.
- 2.9 Information on intimate care should be treated as confidential.
- 2.10 All staff undertaking intimate care must follow appropriate school protocol in terms of Health and Safety and hygiene.
- 2.11 This Intimate Care Policy has been developed to safeguard pupils and staff. It applies to everyone involved in the intimate care of pupils.

3. Person Centered Principles of Intimate Care

The following fundamental principles upon which the Policy and Guidelines are based pay due regard to the United Nations Convention on the Rights of the Child (UNCRC):

- Every child has a right to be safe.
- Every child has the right to personal privacy.
- Every child has the right to be valued as an individual.
- Every child has the right to be treated with dignity and respect (e.g., it would not be appropriate to leave a child in wet/soiled clothes for any period of time).
- Every child has the right to be involved and consulted in their own intimate care to the best of their abilities.
- Every child has the right to express their views on their own intimate care and to have such views taken into account.
- Every child has the right to have levels of intimate care that are as consistent as possible.

Some pupils are legally adults, the policy therefore also pays due regard to the Social Services and Well-Being (Wales) Act 2014. The key principles underpinning the act include;

- Voice and control
- Prevention and early intervention
- Well-being
- Co-production
- Multi-agency

4. Best Practice

- 4.1 Pupils who require regular assistance with intimate care have written consent agreed with staff, parents/carers. Ideally the plan should be agreed at a meeting at which all key staff and the pupil should also be present wherever possible/appropriate. Any historical concerns (such as past abuse) should be taken into account. The plan should be reviewed as necessary, but at least annually, and at any time of change of circumstances, e.g., for residential trips or staff changes (where the staff member concerned is providing intimate care). They should also take into account procedures for educational visits/day trips.
- 4.2 Where relevant, it is good practice to agree with the pupil and parents/carers appropriate terminology for private parts of the body and functions and this should be noted in the plan where appropriate.
- 4.3 Where a care plan is **not** in place, parents/carers will be informed if their child has needed help with meeting intimate care needs (e.g., has had an 'accident' and we or soiled him/herself). **Accurate records should be kept when a pupil requires assistance with intimate care; these can be brief but should as a minimum, include full date, times and any comments such as changes in the pupil's behaviour. It should be clear who was present in every case.**
- 4.4 Where pupils may require ongoing support for their intimate care needs such as toileting, parents/carers will be asked to sign a consent form at the beginning of the school year.
- 4.5 Staff involved with intimate care need to be vigilant to any issues that may require referrals to health or other agencies. In these circumstances accurate records should be kept.

- 4.6 All pupils will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each individual pupil to do as much for his/herself as possible.
- 4.7 Staff who provide intimate care should be made aware of best practice regarding infection control, including the requirement to wear disposable gloves and aprons where appropriate. [Appendix 1]
- 4.8 Staff will be supported to adapt their practice in relation to the needs of individual pupils taking into account developmental changes such as the onset of puberty and menstruation.
- 4.9 There must be careful communication with each pupil who needs help with intimate care in line with their preferred means of communication (verbal, symbolic, etc.) to discuss their needs and preferences. Where the pupil is of an appropriate age and level of understanding, permission should be sought before starting an intimate procedure.
- 4.10 Staff who provide intimate care should speak to the pupil personally by name, explain what they are doing and communicate with all pupils in a way that reflects their ages.
- 4.11 Every pupil's right to privacy and modesty will be respected. Careful consideration will be given to each pupil's situation to determine who and how many carers might need to be present when s/he needs help with intimate care. ALN advice suggested that reducing the numbers of staff involved goes some way to preserving the pupil's privacy and dignity. Wherever possible, the pupil's wishes and feelings should be sought and taken into account. If the manual handling is required then the plan should note the safe number of adults needed to remain during the toileting process.
- 4.12 An individual member of staff should inform another appropriate adult when they are going alone to assist a pupil with intimate care.
- 4.13 The religious views, beliefs and cultural values of pupils and their families should be taken into account, particularly as they might affect certain practices or determine the gender of the carer.
- 4.14 Whilst safer working practice is important, such as in relation to staff caring for a pupil of the same gender, there is research# which suggests there may be missed opportunities for children and young people due to over anxiety about risk factors; ideally, every pupil should have a choice regarding the member of staff. There might also be occasions when the member of staff has good reason not to work alone with a pupil. It is important that the process is transparent so that all issues stated above can be respected; this can best be achieved through a meeting with all parties, as described above, to agree what actions will be taken, where and by whom.
- 4.15 Adults who assist pupils with intimate care should be employees of the school, not students or volunteers, and therefore have the expected range of safer recruitment checks, including enhanced DBS checks.
- 4.16 All staff should be aware of the school's confidentiality policy. Sensitive information will be shared only with those who need to know.
- 4.17 Health & Safety guidelines should be adhered to regarding waste products.
- 4.18 No member of staff will carry a mobile phone, camera or similar device whilst providing intimate care.

5. Child Protection

- 5.1 The Governors and staff at this school recognise that pupils with special needs and who are disabled are particularly vulnerable to all types of abuse.
- 5.2 The school's child protection procedures will be adhered to.
- 5.3 From a child protection perspective, it is acknowledged that intimate care involves risks for pupils and adults as it may involve staff touching private parts of a pupil's body. In this school, best practice will be promoted and all adults (including those who are involved in intimate care and others in the vicinity) will be encouraged to be vigilant at all times, to seek advice where relevant and take account of safer working practice.
- 5.4 Where appropriate, pupils will be taught personal safety skills carefully matched to their level of development and understanding.
- 5.5 If a member of staff has any concerns about physical changes in a pupil's presentation, e.g., unexplained marks, bruises etc., s/he will immediately report concerns to the Designated Senior Person for Child Protection. A clear written record of the concern will be completed and a referral made to the Central Referral Team if appropriate, in accordance with the school's child protection procedures. Advice should be sought from the Central Referral Team as to whether parents/carers are informed of any referral.
- 5.6 If a pupil becomes unusually distressed or very unhappy about being cared for by a particular member of staff, this should be reported to the Headteacher and Designated Senior Person for Child Protection. The matter will be investigated at an appropriate level and outcomes recorded. Parents/carers will be contacted as soon as possible in order to reach a resolution. Staffing schedules will be altered until the issues/s is/are resolved so that the pupil's needs remain paramount. Further advice will be taken from outside agencies if necessary.
- 5.7 If a pupil, or any other person, makes an allegation against an adult working at the school this should be reported to the Headteacher (or to the Chair of Governors if the concern is about the Headteacher) who will consult the Local Authority Designated Child Protection Officer for allegations in accordance with the Carmarthenshire Child Protection policy: The Management of Allegations against Adults who work with Children. It should not be discussed with any other members of staff or the member of staff the allegation relates to.
- 5.8 Similarly, any adult who has concerns about the conduct of a colleague at the school or about any improper practice will report this to the Headteacher or to the Chair of Governors, in accordance with the child protection procedures and 'whistle-blowing' policy.

6. Physiotherapy

- 6.1 If pupils require physiotherapy whilst at school, the programme needs to be agreed with parents/carers. School staff should only undertake physiotherapy techniques/programmes with pupils under the advice and guidance of the physiotherapist.
- 6.2 Under no circumstances should school staff devise and carry out their own exercises or physiotherapy programmes.
- 6.3 Any concerns about the regimes or any failure in equipment should be reported to the physiotherapist.

7. Medical Procedures

- 7.1 Pupils who are disabled might require assistance with invasive or non-invasive medical procedures such as the administration of rectal medication, managing catheters or colostomy bags. These procedures will be discussed with parents/carers, documented in the health care plan and will only be carried out by staff who have been trained to do so and covered by the appropriate school/ LEA insurance.
- 7.2 It is particularly important that these staff should follow appropriate infection control guidelines and ensure that any medical items are disposed of correctly (see useful links).
- 7.3 Any members of staff who administer medication or First Aid should be appropriately trained in accordance with LA guidance. If an examination of a pupil is required in an emergency aid situation, it is advisable to have another adult present, with due regard to the pupil's privacy and dignity.

8. Massage

- 8.1 Massage is now commonly used with pupils who have complex needs and/or medical needs in order to develop sensory awareness, tolerance to touch and as a means of relaxation.
- 8.2 It is recommended that massage undertaken by school staff should be confined to parts of the body such as the hands, arms, leg from the knee down to feet; feet and face in order to safeguard the interest of both adults and pupils.
- 8.3 Any adult undertaking massage for pupils should have been given appropriate guidance by suitably qualified staff.
- 8.4 Care plans should include specific information for those supporting pupils with bespoke medical needs.

USEFUL LINKS:

WG Mind the Germs: Infection Control Guidance for Nurseries, Playgroups and other Childcare Settings
<http://wales.gov.uk/dphhp/publication/communicable-disease/mindthegerms/germse.pdf?lang=en>;

Health Protection Agency: Guidance on infection control in schools and other childcare settings
http://www.hpa.org.uk/webc/hpawebfile/hpaweb_c/1194947358374

Social Services and Well-Being (Wales) Act 2014
<https://gov.wales/docs/dhss/publications/160909safeguarden.pdf>

Appendix 1

Intimate Care Points to Remember

- √ Always wear an apron and dispose of after one use.
- √ Always wear disposable gloves and dispose of after one use.
- √ Dispose of any loose contents of soiled nappies into toilet.

- √ Seal soiled nappies closed and dispose of in bin provided, make sure bin lid is closed to reduce odours.
- √ Spray bed with disinfectant and wipe after each pupil.
Remember **pink** cloths are for use in toilets and **blue** for use in kitchen areas.
- √ If necessary, soiled under-clothes should be rinsed in a bucket kept specifically for this use and the contents disposed of down the toilet.
- √ Store all toxic products up out of pupils' reach.
- √ Please return hoist to original position for charging and ensure controls etc. are out of reach.
- √ Please leave the changing room/toilet as you would hope to find it.

Appendix 2

Intimate Care - Protocol to provide support and develop independence

Foundation Phase/Primary

- Level 1:** Pupil supported from outside the toilet cubicle. Verbal support and checking by opening door to pupil as required.
- Level 2:** 1:1 support provided in the toilet. Take pupil into toilet, assist pupil dress/ undress verbally, guided support if required to remove clothing with minimal physical help, step away and supervise when appropriate from inside toilet cubicle, support pupil wipe bottom if required
- Level 3:** 1:1 total support for all toileting and dressing needs physical help provided throughout.
- Level 4:** 2:1 for some pupils when unwell or agitated. One staff member to reassure as the other changes the pupil.

Secondary Phase

- Level 1:** Pupil supported from outside the toilet cubicle. Verbal support to check on pupil.
- Level 2:** 1:1 support provided for toileting. Take pupil into toilet, assist pupil dress/ undress verbally, guided support if required to remove clothing with minimal physical help, step away and supervise if possible from outside cubicles, listen attentively, re-enter toilet to support as required.
- Level 3:** 1:1 support for all toileting and dressing needs physical help provided throughout. Second adult in vicinity of toilet area.
- Level 4:** 2:1 for some pupils when unwell or agitated. One staff member to reassure as the other changes the pupil.

Menstrual Management

- Level 1:** 1:1 support with verbal support provided from outside toilet.

Level 2: 1:1 support for independent pupils, provide verbal guidance in simple steps for pupil to follow. Check steps are followed correctly. Adult leaves toilet and supports from outside whenever possible.

Level 3: 1:1 support provided to pupil to remove sanitary product and disposal. Support pupil to place clean sanitary product correctly in underwear. Second adult in vicinity of toilet area.

In all situations:

- Female staff for girls.
- Male staff for boys, if possible.
- Clean gloves and apron for each pupil
- Spray bed with disinfectant and wipe after each pupil.
- Pupils requiring manual handling/hoist – 2:1 support provided. Follow Manual Handling Plan

Appendix 3



Home/School Agreement for Intimate Care

Pupil's Name: _____

D.o.B.: _____

Parent/Carer will:

- Agree to the Intimate Care Policy and procedures that will be followed when the pupil is changed – including the use of any cleanser or the application of any cream;
- Inform the School's designated Safeguarding Officer should the pupil have any marks/rash/injuries;
- Agree to review arrangements should this be necessary.

School will:

- Change the pupil should they soil themselves or become uncomfortable or wet;
- Monitor the number of times the pupil is changed in order to identify habits or progress made;
- Report if the pupil is distressed or if marks/rashes/injuries are seen;
- Review arrangements should this be necessary.

Signature of Parent/Carer...

Date...