



Intimate Care Policy

This school is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment

Governors' Committee Responsibility: Curriculum Community and Student Welfare

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Autism Statement

We at Limpsfield Grange School aim to develop practices and policies that promote and sustain the wellbeing of children and young people with Autism.

We aim to offer training and support for staff parents and other stakeholders to enable them to best meet the needs of children and young people with Autism.

We aim to establish a consistent approach across all areas of our school community that enables all students with Autism to learn and make progress.

We aim to ensure that our communication with all stakeholders is clear and appropriate.

We aim to ensure that our physical environment is responsive to the needs of children and young people with Autism, and that we take account of the sensory needs of individuals.

We aim to provide a range of experiences that enable interaction; promote social inclusion and independence; and support learners with Autism to reflect on their experiences.

We aim to empower our learners to understand their Autism and celebrate their difference.

We aim to provide on-going high quality staff development for all members of staff at Limpsfield Grange.

We aim to develop and sustain a multi-disciplinary approach where professionals plan and work together to meet the needs of learners with Autism.

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Health and Intimate Care Introduction

Limpsfield Grange actively promotes the health care of each student and meets any intimate care needs as detailed in a Personal Care Management Plan as necessary. This policy document aims to provide clear principles and guidance on the issue of supporting intimate care needs and is modelled on the Surrey County Council document "Guidance for Intimate Care and Toileting" (Nov 2007). It should be considered in addition to the Surrey guidance "Young People's Health and the Administration of Medicines" (updated 2012) which should be used in the first instance for children and young people with medical/nursing needs and our own written policy, implemented in practice, regarding Student Health and the Administration of Medication.

An increasing number of children and young people with disabilities and medical needs are being included in mainstream and non-specialist educational settings. A significant number of these require assistance with intimate care tasks, especially toileting. Other students may also experience difficulties with toileting for a variety of reasons.

All of the students 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.

The Disability Discrimination Act (DDA 2005) and Equality Act 2010

The Disability Discrimination Act (DDA) provides protection for anyone who has a physical, sensory or mental impairment that has an adverse effect on his/her ability to carry out normal day-to-day activities. The effect must be substantial and long-term.

Anyone with a named condition that affects aspects of personal development must not be discriminated against. All such issues have to be dealt with on an individual basis, and settings are expected to make reasonable adjustments to meet the needs of each child or young person.

Aims

The aims of this policy and associated guidance are:

- To safeguard the rights and promote the welfare of children and young people
- To provide guidance and reassurance to staff who have responsibilities that may include intimate care
- To assure parents and carers that staff are knowledgeable about personal care and that individual concerns are taken into account
- To remove barriers to learning and participation, protect from discrimination, and ensure inclusion for all young people as students

Definition of Intimate Care

'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. Intimate care will be provided by a member of staff who is of the same gender as the student.

The Surrey Administration of Medicines guidance is in place to support staff and young people where nursing tasks are required.

Intimate care tasks specifically identified may include:

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

Definition of Personal Care

‘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 may include:

- Skin care/applying external medication
- Feeding
- Administering oral medication
- Hair care
- 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.

Students may require help with eating, drinking, washing, dressing and toileting.

This guidance is not prescriptive but is based on the good practice and practical experience of those dealing with such children and young people.

Basic Principles

Student’s intimate care needs cannot be seen in isolation or separated from other aspects of their lives.

Encouraging students to participate in their own intimate or personal care should therefore be part of a general approach towards facilitating participation in daily life.

Intimate care can also take substantial amounts of time but should be as positive an experience as possible for the students and for their parents/carer(s).

It is essential that every student is treated as an individual and that care is given as gently and as sensitively as possible.

The student should be encouraged to express choice and to have a positive image of her body.

Staff should bear in mind the following principles:

- Students have a right to feel safe and secure.
- Students have a right to an education and schools have a duty to identify and remove barriers to learning and participation for students of all abilities and needs.
- Students should be respected and valued as individuals.
- Students have a right to privacy, dignity and a professional approach from staff when meeting their needs.
- Students have the right to information and support to enable them to make appropriate choices.
- Students have the right to be accepted for who they are, without regard to age, gender, ability, race, culture or beliefs.
- Students have the right to express their views and have them heard. Schools must have complaints procedures that students can access.
- A student's Personal Care Management Plan should be designed to lead to independence.

Vulnerability to abuse

Children and young people with disabilities have been shown to be particularly vulnerable to abuse and discrimination. It is essential that all staff are familiar with the school Child Protection and Safeguarding Policy and procedures, with agreed procedures within this policy and with the students own Care Plan.

The following are factors that increase the child or young person's vulnerability:

- Children/young people with disabilities often have less control over their lives than is normal.
- They do not always understand sex and relationship education, and so are less able to recognise abuse.
- Through residential, foster or hospital placements, they may have multiple carers.
- Differences in appearance, disposition and behaviour may be attributed to the child's disability rather than to abuse.
- They are not always able to communicate what is happening to them.

Intimate care may involve touching the private parts of the student's body and therefore may leave staff more vulnerable to accusations of abuse. It is unrealistic to eliminate all risk but this vulnerability places an important responsibility on staff to act in accordance with agreed procedures.

Working with families

Establishing effective working relationships with parents/carers is a key task for all schools and is particularly necessary for children/young people with special care needs or disabilities.

Parents/carers should be encouraged and empowered to work with professionals to ensure their child/young person's needs are properly identified, understood and met.

Although they should be made welcome, and given every opportunity to explain the student's particular needs, they should not be made to feel responsible for the young person's care in school or for making teaching staff disability aware. They should be closely involved in the preparation of Individual Health Care Plans or an Personal Care Management Plan. Staff have a duty to remove barriers to learning and participation for students of all abilities and needs.

Plans for the provision of intimate/personal care must be clearly recorded to ensure clarity of expectations, roles and responsibilities. Records should also reflect arrangements for ongoing and emergency communication between home and school, monitoring and review. It is also important that the procedure for dealing with concerns arising from personal care processes is clearly stated and understood by parents/carers and all those involved.

Links with other agencies

Children and young people with special care needs or disabilities may be known to a range of other agencies. It is important that positive links are made with all those involved in the care or welfare of individual students. This will enable school based plans to take account of the knowledge, skills and expertise of other professionals and will ensure the students well-being and development remains the focus of concern.

Arrangements for ongoing liaison and support to school staff where necessary should also be formally agreed and recorded. It is good practice for schools to identify a named member of staff to co-ordinate links with other agencies for individual students.

Schools have a responsibility to teach toilet training and other personal care skills. For some children and young people, achieving continence will never be possible. Assistance with the management of their toileting needs should be provided sensitively to allow them continued access to the full curriculum, life in the establishment, and dignity in front of peers and staff.

Good Practice Guidance

In many schools, education and other settings, designated staff are involved on a daily basis in providing intimate/personal care to students with special educational needs arising from learning difficulties, sensory impairments, medical needs and physical disabilities. This places those staff in a position of great trust and responsibility. They are required to attend to the safety and comfort of the students and to ensure that they are treated with dignity and respect.

The time taken to carry out this care can also be used to promote personal development, as even the youngest child can be encouraged to become aware of and value their own body and extend their personal and communication skills. If such opportunities are denied then they may not learn to distinguish between appropriate and inappropriate. Confident and self-assertive children and young people who feel their bodies belong to them are less vulnerable to sexual abuse.

Religious and cultural values must always be taken into account when making arrangements for managing intimate/personal care needs for children and young people, and stereotypes

should be challenged. Staff concerned should begin by simply asking questions about the student being supported and try to discover things about their background and experience.

It is vital that staff meet with parents/carers and the student prior to admission, to discuss whether an Personal Care Management Plan is required and those staff most likely to be involved in providing the intimate/personal care aspects.

Examples of positive approaches to intimate/personal care which ensure a safe and comfortable experience for the student:

- Get to know the student beforehand in other contexts to gain an appreciation of her mood and systems of communication
- Have a knowledge of and respect for any cultural or religious sensitivity related to aspects of intimate care
- Speak to the student by name and ensure they are aware of the focus of the activity. Address the student in age appropriate ways
- Give explanations of what is happening in a straightforward and reassuring way
- Agree terminology for parts of the body and bodily functions that will be used by all staff and encourage students to use these terms
- Respect a student's preference for a particular sequence of care
- Give strong clues that enable the student to anticipate and prepare for events e.g. show the clean pad to indicate the intention to change, or the sponge/flannel for washing
- Encourage the student to undertake as much of the procedure for themselves as possible, including washing intimate areas and dressing/undressing
- Seek the student's permission before undressing if she is unable to do this unaided
- Provide facilities that afford privacy and modesty
- Keep records noting responses to intimate care and any changes of behaviour
- Provide support aids to enable students to manage their own intimate health care needs as independently as possible

Practical considerations for leaders to ensure health and safety of staff and students:

- All adults assisting with intimate/personal care should be employees of the school. This aspect of their work should be reflected in the job description
- Staff should receive training in good working practices which comply with Health and Safety regulations such as dealing with bodily fluids, wearing protective clothing, Manual Handling, Child Protection, HIV and Infection, Whistle Blowing, Risk Assessment. Identified staff should also receive training for very specific intimate care procedures where relevant
- Where a routine procedure needs to be established, there should be an agreed Personal Care Management Plan involving discussion with school staff, parents or carers, relevant health personnel and the student. All parties should sign the plan. The plan must be reviewed on a regular basis. The school's complaints procedures should be known to all, and followed where necessary.

The Intimate Care Plan should cover:

- Facilities
- Equipment
- Staffing
- Training
- Curriculum specific needs
- School trips / outings

- Individual strategies and aids that promote independence
- Arrangements for review and monitoring of the Personal Care Management Plan
- Details of the schools Complaints Policy and Procedures

Staffing levels need to be carefully considered. There is a balance to be struck between maintaining privacy and dignity for students alongside protection for them and staff. It is important for each school to decide on practical ways of dealing with staffing levels. Some procedures may require two members of staff for health and safety reasons e.g. manual handling. This should be clearly stated in the Personal Care Management Plan.

As far as possible, personal care procedures should be carried out by one person, protection being afforded to a single member of staff in the following ways:

- Personal care staff implement the strategies in the “examples of positive approaches” section outlined above
- Personal care staff notify the teacher, line manager or other member of staff, discreetly, that they are taking the student to carry out a care procedure
- A signed record is made of the date, time and details of any intervention required that is not part of an agreed routine. See relevant form in Appendix A. A decision can be made at the Intimate Care Plan meeting as to whether a regular record needs to be kept of routine procedures
- If a situation occurs which causes personal care staff embarrassment or concern, a second member of staff should be called if necessary, and the incident reported and recorded.
- When staff are concerned about a student’s actions or comments whilst carrying out the personal care procedure, this should be recorded and discussed with a line manager immediately

Other practical considerations for managers:

- Is a risk assessment for Moving and Handling required?
- There should be sufficient space, heating and ventilation to ensure safety and comfort for staff and student
- Facilities with hot and cold running water. Anti-bacterial hand wash should be available
- Items of protective clothing, such as disposable gloves and aprons should be provided. No re-use of disposable gloves
- Special bins should be provided for the disposal of wet and soiled pads. Soiled items should be “double-bagged” before placing in the bin
- There should be special arrangements for the disposal of any contaminated waste/clinical materials
- Seeking advice on general continence issues through the School Nurse or Health Visitor. For specific conditions, the School Nurse, Health Visitor and/or parents/carers should be able to provide links with relevant specialists
- Supplies of suitable cleaning materials should be available. Anti-bacterial spray should be used to clean surfaces
- Supplies of clean clothes (the student’s own where possible) should be easily to hand to avoid leaving the student unattended while they are located
- Adolescent girls will need arrangements for menstruation in their plan
- Schools should have a supply of sanitary wear which can be provided for girls in a sensitive and discreet way

Training

The requirement for staff training in the area of intimate/personal care will vary greatly and will be largely influenced by the needs of the students for whom staff have responsibility. Consideration will be given, however, to the need for training on a whole school basis and for individual staff who may be required to provide specific care for an individual student or small number of students.

Whole staff group training should provide staff with opportunities to work together on the range of issues covered within this document thus enabling the development of a culture of good practice and a whole school approach to personal care. Whole school training should provide disability awareness, and opportunities for staff to increase knowledge and enhance skills.

More individualised training will focus on the specific processes or procedures staff are required to carry out for a specific student. In some cases this may involve basic physical care which might appropriately be provided by a parent or carer. Designated staff may require training in safe moving and handling. Thus enabling them to feel competent and confident and ensure the safety and well-being of the student. It is imperative for the school and individual staff to keep a dated record of all training undertaken.

For any student requiring intimate or personal care, it is recommended as good practice that this be discussed with the school nursing or health visiting service.

Managing risk

These guidelines aim to manage risks and ensure that employees do not work outside the remit of their responsibilities. It is essential that all staff follow the guidance set out in this policy and take all reasonable precautions to prevent or minimise accident, injury, loss or damage. It is of particular importance with regard to:

- Staff training
- The recording of activities as necessary
- Consent being obtained from parents/ carers
- The Intimate Care Plan being written with, and signed by parents/carers
- The presence of two adults when required, unless the parents/carers have agreed to the presence of one adult only

Appendix A provides some advice that will help inform the intimate care plan. It also provides a selection of forms to support care to be used as required: -

Form 2

Personal Care Management Checklist (to inform the written personal care management plan)

Child/young person's name _____

Facilities	Discussed	Action
<p>Suitable toilet identified?</p> <p>Adaptations required?</p> <ul style="list-style-type: none">• Changing mat/table (easy clean surface)• Grab rails• Step• Easy operate locks at suitable height• Accessible locker for supplies• Mirror at suitable height• Hot and cold water• Lever taps• Disposal unit• Moving and Handling equipment• Bleeper/emergency help		
<p>Child / yp provided supplies</p> <ul style="list-style-type: none">• Pads• Catheters• Wipes• Spare clothes• Others (specify) <p>School/setting provided supplies</p> <ul style="list-style-type: none">• Toilet rolls• Urine bottles• Bowl/bucket• Antiseptic cleanser, cloths and blue roll• Antiseptic handwash• Milton/sterilising fluid• Paper towels, soap• Disposable gloves/aprons• Yellow sacks/disposal bags		

<p>Staff training/communication</p> <ul style="list-style-type: none"> ◆ Advice sought from medical personnel? Manual Handling Adviser? ◆ Parental/carer involvement in the management plan ◆ Child/young person's involvement in the management plan ◆ Any parental/child/young person's preference for gender of carer ◆ Specific training for staff in personal care role ◆ Awareness raising for all staff ◆ PE staff <p>Other children / pupils?</p> <ul style="list-style-type: none"> ◆ Consult child/young person, respect privacy ◆ How does the child/young person communicate needs? 	<p>Discussed</p>	<p>Action</p>
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<p>PE issues to enable access to all activities</p> <ul style="list-style-type: none"> ◆ Discreet clothing required? ◆ Privacy for changing? ◆ Specific advice required for swimming? ◆ Specialist nurse? ◆ Manual Handling Adviser? 	<p>Discussed</p>	<p>Action</p>
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<p>Support</p> <p>Identified staff</p> <p>Back up staff</p> <p>Training for back up staff</p> <p>Time plan for supporting Personal care need</p>	<p>Discussed</p>	<p>Action</p>
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Personal Care Management Plan

(developed from the Personal Care Management Checklist)

Student's name:	Date of Birth:
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Date:	Date for Review:
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Details of assistance required:

Facilities and equipment: (Clarify responsibility for provision of supplies e.g. parent/carer/school/other)

Staffing:	Back up:
Time plan:	

Training needs (individual staff must keep signed/dated records of training received in addition to school and setting held records. A record should be completed when training has been delivered and kept as part of the care plan)

Curriculum specific needs:

Arrangements for trips/transport:

Procedures for monitoring and complaints: (including notification of changing needs by any relevant party)
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Current plan has been agreed by:-			
Name	Role	Signature	Date:
	Student		
	Parent		
	Staff		

Agreement of Intimate Care Procedures for a Child /Young Person with Complex needs

The purpose of this agreement is to ensure that both parents/carers and professionals are in agreement with what care is given, who is providing the care and that the appropriate training is given.

Teaching of the care procedure may be carried out by the parent/carer or by the professional experienced in that procedure.

When the parent/carer and/or professional are agreed the procedure has been learned and the staff carer feels comfortable with, and competent to administer that procedure this record should be signed by the parties. One copy should be given to the staff carer, one retained in the staff carer's personnel file and one filed in the child/young person's medical health record.

Child/young person's Name.....

Procedure.....

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Staff Carer's Name.....

Staff Carer's Signature.....Date.....

Parent/Carer and/or Professional

I have taught the above procedure to the named staff carer and have assessed him/her as able to perform the care as instructed.

Signed.....Date.....

Designation.....

Date Reviewed.....Autumn term

Date Reviewed.....Spring term

Date Reviewed.....Summer term.

