



INTIMATE CARE POLICY AND GUIDELINES

INTRODUCTION

The Intimate Care Policy and Guidelines Regarding Children have been developed to safeguard children and staff. They apply equally to the school and residences and to everyone involved in the intimate care of children and are designed to safeguard children and staff.

We will comply with all regulations which govern schools and Children's Homes in England.

The rights of the child underpin all intimate care procedures and are embedded in the United Nations High Commission (1990) and the Department of Health (2004). These include

- Every child has the 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.
- 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.

Disabled children can be especially vulnerable. Staff involved with their intimate care need to be sensitive to their individual needs. All staff need to be aware that some adults may use intimate care, as an opportunity to abuse children. It is important to bear in mind that some care tasks / treatments can be open to misinterpretation. Adhering to these guidelines of good practice will safeguard children and staff.

AIMS

The aims of this policy are

- To promote good practice in the intimate care of children and young people
- To protect children from abuse and exploitation
- To protect staff from unfounded allegations of abuse or mistreatment

SCOPE

The policy applies to all personnel (including bank and supply staff) who are involved in the direct care of children.

RESPONSIBILITIES

All staff who are required to provide care of an intimate nature are personally responsible for ensuring their actions comply with this policy.

ORGANISATIONAL ARRANGEMENTS

All staff working at oaklands Park School will be vetted. Vetting includes:

- Police checks (Enhanced CRB)
- Pre-employment checks
- Two independent references
- Senior staff will ensure that all staff undertaking the intimate care of children are familiar with, and understand the Intimate Care Policy and Guidelines.
- All staff will be trained in the specific types of intimate care that they carry out and fully understand the Intimate Care Policy and Guidelines within the context of their work.
- Intimate care arrangements will be agreed by the parents, child (if appropriate) and staff.
- Staff should take note of any requests/provisions made by parents/carers with respect to intimate care
- Intimate care arrangements should be reviewed at least six monthly via the care plan and or IEPs. The views of all relevant parties, including the child (if appropriate), should be sought and considered to inform future arrangements.

If a staff member has concerns about a colleague's intimate care practice they must report this to a senior colleague, the Designated People for Safeguarding or use the confidential Devon County Council phone line.

DEFINITION

The understanding of what is intimate care may vary within diverse cultures. The staff can clarify this with the parents.

Intimate care can include:

- Feeding
- Oral care
- Washing
- Dressing / undressing
- Toileting
- Menstrual Care
- Photographs and Examinations
- Treatments such as enemas, suppositories, enteral feeds (Gastric Tubes)
- Catheter and stoma care.
- Supervision of a child involved in intimate self-care.
- Applying/renewing dressings to intimate parts of the body.
- Cutting nails
- Giving medication

Parents have a responsibility to advise staff of the intimate care needs of their child, which should be documented in the child's individual care plan.

GUIDELINES FOR GOOD PRACTICE

- Involve the child in their intimate care
- Try to encourage a child's independence as far as possible in his / her intimate care. Where the child is fully dependent talk with them about what is going to be done and give them choice where possible. Check your practice by asking the child / parent any likes / dislikes while carrying out intimate care.
- Treat every child with dignity and respect and ensure privacy appropriate to the child's age and situation.
- A lot of care is carried out by one care worker alone with one child. The practice of providing 1:1 intimate care of a child alone is supported, unless the activity requires two persons for the greater comfort / safety of the child or the child prefers two persons.
- Make sure practice in intimate care is consistent
- As a child can have multiple care workers a consistent approach to care is essential. Effective communication, both written and verbal, between parents and care workers ensures practice is consistent.
- Be aware of own limitations
- Care workers will only undertake care activities they understand and are competent and confident to carry out. If in doubt ASK. Some procedures must only be carried out by staff who have been formally trained and assessed e.g. enteral (gastric) feeding, rectal diazepam.
- Promote positive self-esteem and body image.
- Confident, self-assured children who feel their body belongs to them are less vulnerable to sexual abuse. The approach taken to intimate care can convey lots of messages to a child about their body worth. Staff attitude to a child's intimate care is important. Keeping in mind the child's age, routine care can be relaxed, enjoyable and fun.
- Any concerns must be reported and immediately.
- If any unusual markings, discolouration or swelling including the genital area are observed, they must be reported immediately to the designated manager.
- If during the intimate care of a child is accidentally hurt, or the child appears to be sexually aroused by the care actions, or misunderstands or misinterprets something, reassure the child, ensure their safety and report the incident immediately to the designated manager.
- Report and record any unusual emotional or behavioural response by the child.
- A written record of concerns must be made and kept in the child's personal file.
- Parents must be informed about concerns.

WORKING WITH CHILDREN OF THE OPPOSITE SEX

Principles:

- There is a positive value in both male and female staff being involved with children
- Ideally, every child should have the choice of care worker for all their intimate care.
- The individual child's safety, dignity and privacy are of paramount importance.
- The practical guidelines set out below, are written in the knowledge that the current ratio of female to male staff means we are far less likely to be able to offer the choice of same sex care worker to male children.

Male and Female staff can be involved with children of either sex in:

- Key working and liaising with families.
- Co-ordinating of and contribution to a child's review.
- Meeting the developmental, emotional and recreational needs of the children.
- Escorting the children between sites, on outings and to clinics unless intimate care is needed.
- It may be possible to determine a child's wishes by observation of their reactions to the intimate care they receive. Do not assume that a child cannot make a choice.

The intimate care of boys / girls can be carried out by a member of staff of the opposite sex with the following provisions:

- If a parent/child has expressly requested a same sex carer the school will make every effort to accommodate this within existing staffing structures and duty rotas.
- When intimate care is being carried out, **all** children have the right to dignity and privacy i.e. they should be appropriately covered, the door closed or screens put in place.
- If the child appears distressed or uncomfortable when personal care tasks are being carried out, the care should stop immediately. Try to ascertain why the child is distressed and provide reassurance. Prior knowledge of the child is important and wherever possible care should be carried out by staff who have experience of working with a child.

COMMUNICATION WITH CHILDREN

It is the responsibility of all care workers caring for a child to ensure that they are aware of the child's method and level of communication.

Children communicate using different methods e.g. words, signs, symbols, body movements, eye pointing.

To ensure effective communication:

- Ascertain how the child communicates e.g. consult with child and parent and, these needs must be recorded in the child's personal file. If further information is required please consult with the child's Speech and Language Therapist.
- Make eye contact at the child's level.
- Use simple language and repeat if necessary.
- Wait for response.
- Continue to explain to the child what is happening even if there is no response.
- Treat the child as an individual with dignity and respect.

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