The Dales School
North Yorkshire

Health & Safety

Intimate Care and physical contact Policy & procedures

Appendix 5

Person responsible: Ann Marie Ellis
Adopted and reviewed by the Governing Body: October 26
Review Date: October 27

1. Introduction

This policy represents the agreed principles for intimate care throughout the school.
The purpose of this policy is:

- To safeguard the rights and promote the best interests of the children
- To ensure children are treated with sensitivity and respect, and in such a way that their experience of intimate care is a positive one
- To safeguard adults required to operate in sensitive situations
- To raise awareness and provide a clear procedure for intimate care
- To inform parents/carers in how intimate care is administered
- To ensure parents/carers are consulted in the intimate of care of their children
- Where appropriate to engage the pupils in supporting with their own personal and intimate care in order to develop independence

2. Principles

It is essential that every child/young person is treated as an individual and that care is given with empathy and respect. As a duty of care in order to meet the basic needs hierarchy it is critical that pupils feel safe, comfortable and well so they are ready for learning. As far as possible, the child/young person should have a voice and should be encouraged to have a positive image of their own body. It is important for staff to bear in mind how they would feel in the child/young person's position. Personal and intimate care should be considered a learning opportunity to support a pupil's independence and develop awareness of PSHE, communication and physical curricular areas e.g., body and spatial awareness, body parts and hygiene, indicating yes or no or other fundamental expression of personal choice or need. Parents and staff must ensure that all aspects of intimate care are dealt with confidentially and sensitively and that each young person's right to privacy and dignity is maintained at all times.

3. Definition

Intimate care can be defined as any personal care which involves washing, touching or carrying out a procedure to intimate personal areas that pupils are unable to independently complete or require support in completing because of their chronological or developmental age, physical or sensory needs. Examples include care associated with continence and menstrual management as well as tasks such as help with washing, toileting or dressing.

4. Best Practice

Supporting dressing/undressing

Dressing/undressing skills are often part of a pupil's learning; fine motor skills [fastenings], cognition [sequencing], and independence skills in PfA. Programmes are often supported by occupational health recommendations and in conjunction with home.

Providing comfort or support

Children may seek physical comfort from staff. Where children require physical support, staff need to be aware that physical contact must be kept to a minimum and be child initiated. When comforting a child, or giving reassurance, staff must be aware of the positioning of their body to always ensure absolute integrity.

If physical contact is deemed to be appropriate staff must provide care which is suitable to the age and stage(including cognitive development), gender and situation of the child/young person. If a child/young person touches a member of staff in a way that makes them feel uncomfortable this can be gently but firmly discouraged in a way which communicates that the touch, rather than the child, is unacceptable and model positive socially acceptable alternatives

Other physical contact for manual handling or medical procedures will be detailed in a pupil's health care and or moving handling plan. Please also refer to the School's behaviour policy in relation to touch when applying positive handling.

Wetting and Soiling
In the case of a toileting incident then the child/young person should be supported on being as independent as possible in undressing/dressing and washing themselves.

Promotion of Personal Care Relating to Continence
Promoting continence in children/young people is an essential aspect of the curriculum and supports key aspects of independence and preparation for adulthood. Factors when considering personal care;

- Parents must ensure that their child / young person wears clothing that allows for personal care support, and provide school with enough appropriate spare clothes for their child/young person.
- Personal care facilities should be accessible when required.
- Personal care facilities should provide privacy.
- Personal care facilities should be clean and tidy.
- Personal care facilities should be provided with all resources required for personal care routines
- Should be provided with adequate hand washing facilities, soap and hand towels.
- Hoist facilities and personal equipment should be provided for if appropriate

When a child has a known continence need as identified on an EHCP-the school staff, in liaison with parents, school, health and the child/young person if appropriate should discuss options. Depending on the outcome of these discussions this should be recorded in pupil profiles, behaviour support or moving and handling. The following should be considered:

- A full assessment of the child's/young person's needs should be undertaken, and a monitoring system put in place, so the child's progress can be measured.
- Everyone should support the child to achieve the highest level of autonomy that is possible for their age and ability. It should give staff guidance on ways to encourage the child to do as much for him/herself as he /she can.
- Consideration should be given to each child's situation to establish how many carers need to be present when a child is toileted.
- Only Staff who have received training in Health and Safety and Safeguarding Children can support personal care routines.
- Arrangements should be made for offsite activities.
- An assessment of the suitability for the child/young person of toilet facilities at school and at home may be necessary, with the advice of the occupational therapy service.
- Targets for developing and supporting continence can include:
    - Going to the toilet at regular intervals or at specific times. Sensitive arrangements should be in place to allow children to toilet themselves at intervals to suit their needs and not at the demands of school routine.
    - Going to the toilet independently.
    - Ability to clean him/herself after using the toilet. Agreement should be obtained from the pupil and the pupils parents/carers and procedures established (including the level of supervision required)
    - Ability to tell an adult if he/she has had an accident.
    - Ability to wash hands after using the toilet.
    - Ability to undress/dress self.
- Consideration may be given to include a jointly agreed toilet training programme Children should be encouraged to drink regular amounts of fluid during the school day; minimum

recommendation is 3-4 full drinks per school day. This should be increased when children are exercising or during spells of hot weather.

- Members of staff who are involved in changing and /or cleaning children with continence difficulties should wear protective plastic aprons and protective gloves.
- Changing beds should be cleaned with antibac after each use.

Please refer to the Dales Schools guidelines on Infection Control & Moving and Handling

Protection for staff

Members of staff need to have regard to the danger of allegations being made against them and take precautions to avoid this risk.

These should include:

• Gaining a verbal agreement from another member of staff that the action being taken is necessary

• Allow the child, wherever possible, to express a preference to choose his/her carer and encourage them to say if they find a carer to be unacceptable

• Allow the child a choice in the sequence of care

• Be aware of and responsive to the child's reactions

It is not practical, nor required for all pupils to receive 2:1 personal care, where this is necessary it will be detailed in their manual handling or behaviour support plan.

Safeguards for children

All staff at The Dales School are DBS (Disclosing and Barring Service) checked on application and cannot undertake tasks within school until all checks are completed satisfactorily. The DBS's aim is to help organisations in the public, private and voluntary sectors by identifying candidates who may be unsuitable to work with children or other vulnerable members of society. Personal and professional references are also required and unsuitable candidates are not permitted to work within the school. All those working with children should be closely supervised throughout a probationary period and should only be allowed unsupervised access to children once this has been completed to their supervisor's satisfaction.

If a member of staff (including agency staff) have any concerns about a child or any part of the process, they MUST follow the school's reporting procedures.

Personnel involved with personal care

It is always the preferred option that the person undertaking or supporting personal care is known to the pupil, however, when staffing is impacted by absence, this may not always be possible and on these occasions, the class lead should consider the following in delegating personal care duties:

- Is there any specific manual handling required, if so, where the care is 2:1, the second person be directed by the trained member of staff to offer specific support, e.g. moving the hoist up and down and supporting pupil as directed.
- Is there any specific behaviour support required, if so, is reading the pupil's behaviour support plan sufficient and/or are they in an area with other staff, in the event of additional support being required.

Unfortunately, it will not always be possible for the personal care to be undertaken by someone of the same gender.

It is not appropriate for volunteers, nor any member of staff on a red lanyard to carry out intimate care procedures or be in an area where these procedures are being carried out.

Appendix 1:

Personal Care Plan
Pupil Name: Completed/Updated by: Parent/Carer Signature: Base Group: Date:

Personal Care Routines- continent or incontinent, independent with adult supervision, partially supported increasing independence e.g., prompted to wash hands, pull up trousers, requires adult to support with total personal care routine [anticipates routine, lifts bottom or initiates roll to side etc].		<u>Timeline for daily personal care routine</u>
Continence/Personal Care Products- what continence and sanitary wear products and support are used e.g., pads & size, pull ups, period pants, intimate care cleaning products.		
Toileting Programme- schedule of toileting access and use e.g., times noted, urinated, bowels open, pad dry. Sitting on the toilet. Nursing team involved.		
Personal Care Space- access to large toileting room with changing bed, smaller toileting space, pupil independent toilets, class pupil personal areas.		
Specialist Toileting Seating- make and model, location.		
Changing Position- standing to change or use of changing bed, access considerations e.g., Manual handling plan, MOVE programme, BSP, Postural management.		
Total Communication and Pupil Voice- use of TaSSeLs, OoR, symbols, pupil preferences noted e.g., lighting, supporting adult, orientation on changing bed, singing.		
Hand washing and dressing/undressing- what levels of support are required to prompt hand washing, turning on/off tap, using hand towels and pulling down/up pads/underwear/trousers.		
Oral hygiene- tooth brushing, consent from home, what prompting is required to support- PP, VP, modelling.		
Additional Information- further detail or factors to consider when supporting personal care routines.		