

Intimate Care Policy

B. School is committed to ensuring that all staff responsible for the intimate care of children and young people will undertake their duties in a professional manner at all times. B. School recognises that there is a need to treat all children and young people with respect when intimate care is given. No child should be attended to in a way that causes distress or pain.

Staff who work with young children or children/young people who have special needs will realise that the issue of intimate care is a difficult one and will require staff to be respectful of children's needs.

Intimate care can be defined as care tasks of an intimate nature, associated with bodily functions, body products and personal hygiene which demand direct or indirect contact with or exposure of the genitals. Examples include care associated with continence and menstrual management as well as more ordinary tasks such as help with washing or bathing and changing for swimming and PE.

Children and young people's dignity will be preserved and a high level of privacy, choice and control will be provided to them. Staff who provide intimate care to children and young people have a high awareness of child protection issues. Staff behaviour is open to scrutiny and staff at B. School work in partnership with parents/carers to provide continuity of care to children/young people wherever possible.

Our Approach to Best Practice

All children and young people who require intimate care are treated respectfully at all times; the child's welfare and dignity is of paramount importance.

Staff who provide intimate care are trained to do so (including Child Protection and Health and Safety training in moving and handling) and are fully aware of best practice. Equipment is provided to assist with children and young people who need special arrangements following assessment from physiotherapist/occupational therapist as required.

Staff will be supported to adapt their practice in relation to the needs of individual children and young people taking into account developmental changes such as the onset of puberty and menstruation. Good practice is making sure you are beyond reproach!

There is careful communication with each child who needs help with intimate care in line with their preferred means of communication (verbal, symbolic, etc) to discuss the child's needs and preferences. Every effort is made to ensure that the children understand the procedures that are carried out.

As a basic principle children and young people will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each child to do as much for themselves as they can. This may mean, for example, giving the child responsibility for washing themselves. Individual intimate care plans may be drawn up for particular children and young people as appropriate to suit the circumstances of the child.

Each child's right to privacy will be respected. Careful consideration will be given to each child's situation to determine how many carers might need to be present when a child needs help with intimate care. Where possible one child will be cared for by one adult unless there is a sound reason for having two adults present. If this is the case, the reason is clearly documented on a Moving and Handling or Behaviour Plan.

Wherever possible the same child will not be cared for by the same adult on a regular basis; there will be a rota of carers known to the child who will take turns in providing care. This will ensure, as far as possible, dependency on one person is discouraged, while at the same time guarding against the care being carried out by a succession of completely different carers.

The Protection of Children and Young People and Staff

The L.A. Safeguarding Children Board Procedures will be accessible to staff and adhered to. All staff will receive Safeguarding and Training every 3 years in line with Working Together 2006.

Where appropriate, all children and young people will be taught personal safety skills carefully matched to their level of development and understanding (PSHE).

If a member of staff has any concerns about physical changes in a child's presentation, eg marks, bruises, soreness etc, s/he will immediately report concerns to the appropriate manager/designated person for child protection. A clear record of the concern will be completed and when necessary, a child welfare concern will be logged with the Safeguarding Children Service and a referral made to the Social Care Helpdesk. Parents will be informed that a referral is necessary prior to it being made unless doing so is likely to place the child at greater risk of harm.

If a child becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be looked into and outcomes recorded. Parents/ carers will be contacted at the earliest opportunity as part of this process in order to reach a resolution. Staffing schedules will be altered until the issue(s) are resolved so that the child's needs remain paramount. Further advice will be taken from outside agencies if necessary.

If a child makes an allegation against a member of staff, all necessary procedures will be followed (see Allegations Management within the school's handbook)