

Intimate/Personal Care & Toileting Policy

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Meath | A Speech and Language UK school | Principal: Majella Delaney

Brox Road, Ottershaw, Surrey, KT16 OLF | 01932 872302 | www.meathschool.org.uk | meath@meathschool.org.uk Non-Maintained School | DfE No. 936/7063

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Introduction

Meath School is a day and residential special school for primary aged children with speech, language and communication disorders and high functioning autism (formerly known as Asperger's syndrome), that affect, to varying extents, their ability to understand and use language effectively for all communication. Many of the pupils have additional, associated difficulties and these can include difficulties with intimate care tasks including toileting.

All of the children 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.

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 will be involved in intimate care
- To assure parents and carers that staff are knowledgeable about personal care and that their individual concerns are taken into account

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. In some cases, it may be necessary to administer rectal medication on an emergency basis.

Intimate care tasks specifically identified as relevant include:

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

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 curriculum, life in the establishment and dignity in front of peers and staff.

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

Personal care tasks specifically identified as relevant here include:

- Skin care/applying external medication
- Feeding
- Administering oral medication
- Hair care
- Nail Cutting
- Dressing and undressing (clothing)
- Washing non-intimate body parts
- Prompting to go to the toilet and monitoring if needed

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.

Children and young people 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 dealing with such children.

General Practice Principles:

Children's intimate care needs cannot be seen in isolation or separated from other aspects of their lives. Encouraging them to participate in their own intimate or personal care should therefore be part of a general approach towards facilitating participation in daily life.

Intimate and personal care can also take substantial amounts of time but should be an enjoyable experience for the child/young person and for their parents/carer(s). It is essential that every child/young person is treated as an individual and that care is given as gently and as sensitively as possible. The child/young person should be encouraged to express choice and to have a positive image of his/her body.

Staff should bear in mind the following principles:

- Children/young people have a right to feel safe and secure
- Children/young people have a right to an education and schools have a duty to identify and remove barriers to learning and participation for pupils of all abilities and needs
- Children/young people should be respected and valued as individuals
- Children/young people have a right to privacy, dignity and a professional approach from staff when meeting their needs

- Children/young people have the right to information and support to enable them to make appropriate choices
- Children/young people have the right to be accepted for who they are, without regard to age, gender, ability, race, culture or beliefs
- Children/young people have the right to express their views and have them heard
- Meath School has a complaints procedure that children and young people can access
- A child/young person's Intimate/Personal care plan should be designed to lead to independence

Safeguarding

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 Meath School Child Protection and Safeguarding Policy and Procedures, with agreed procedures within this policy and with the child/young person's own Care Plan.

Intimate care may involve touching the private parts of the child/young person'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.

Every member of staff who changes a child will be trained in safeguarding procedures. They will inform another member of staff that they are going to change a child. They will wear gloves when changing a child.

Working with Parents/Carers

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 their child/young person's particular needs, they should not be made to feel responsible for their child/young person's care in school. They should be closely involved in Individual Learning Targets (ILTs), Individual Support Plans and Health Care Plans.

Links with other agencies:

Children and young people with special care needs or disabilities will 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 children/young people. This will enable school or setting based plans to take account of the knowledge, skills and expertise of other professionals and will ensure the child/young person's well being and development remains the focus of concern. Arrangements for ongoing liaison and support to school or setting staff where necessary should also be formally agreed and recorded. The Residential Services Manager in liaison with the class and/or residential team will co-ordinate links with other agencies where needed.

Good Practice Guidance:

Staff within a child's class team during the day and the residential staff in the evening have responsibility for a child's intimate care needs. This places those staff in a position of great trust and responsibility. They are required to attend to the safety and comfort of the children/young people 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 children may not learn to distinguish between appropriate and inappropriate. Confident and selfassertive children and young people who feel their bodies belong to them maybe 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 child/young person being supported and try to discover things about their background and experience.

Cross gender care:

There is positive value in both male and female staff being involved in intimate/personal care tasks, although it may be unacceptable to some parents, carers, or the child or young person to have a carer of the opposite sex to attend to toileting or other intimate needs, and this should be respected.

However, at times there may be circumstances where there are human resource implications preventing full consideration to the optimum gender balance (available carers are more likely to be female).

It is vital that a meeting happens with parents/carers and the child/young person (if appropriate) prior to starting to discuss the care plan and staff likely to be involved in providing intimate/care procedures.

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

- Get to know the child/young person beforehand in other contexts to gain an appreciation of his/her mood and systems of communication
- Have a knowledge of and respect for any cultural or religious sensitivities related to aspects of intimate care
- Speak to the child/young person by name and ensure they are aware of the focus of the activity. Address the child/young person in language 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 staff and encourage children/young people to use these terms appropriately
- Respect a child/young person's preference for a particular sequence of care

- Give strong clues that enable the child/young person to anticipate and prepare for events e.g. show the clean nappy/pad to indicate the intention to change, or the sponge/flannel for washing
- Encourage the child/young person to undertake as much of the procedure for themselves as possible, including washing intimate areas and dressing/undressing
- Seek an older child's permission before undressing if he/she is unable to do this unaided
- Provide facilities that afford privacy and modesty

Practical considerations for managers / supervisors to ensure health and safety of staff and children/young people:

- All adults assisting with intimate/personal care should be employees of the school or setting. This aspect of their work should be reflected in their job description. In exceptional circumstances unpaid employees i.e. voluntary workers may assist provided they have been trained and DBS cleared, and with agreement of all parties.
- 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 will be an agreed care plan involving discussion with school, parents or carers, relevant health personnel and the child/young person. All parties should sign the plan. The plan must be reviewed on a regular basis. The school or complaints procedures should be known to all and followed where necessary.

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.
- Where appropriate doors to bathrooms etc should be left ajar, but whilst maintaining dignity and privacy for the children.
- Personal care staff notify the teacher, line manager or other member of staff, discreetly, that they are taking the child/young person 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.
- 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 child/young person'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 child/young person.
- Facilities with hot and cold running water. Anti-bacterial handwash 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 nappies/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.
- Seek advice on general continence issues through the Residential Services Manager for specific conditions. The Residential Services Manager, 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 child or young person's own where possible) should be easily to hand to avoid leaving the child 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:

Staff at Meath are very experienced at delivering intimate/personal care. Individual needs will be discussed and documented by the Residential Services Manager on her meeting with the child's family at admission. The member of SLG who meets with the family on the child's first day will find out any information needed and the appropriate forms will be filled in or sent home. Any new staff will be given training that is relevant to their role and the needs of the children they are working with.

Whole staff group training will be provided where necessary and appropriate. More individualised training will focus on the specific processes or procedures staff are required to carry out for a specific child/young person. In some cases this may involve basic physical care which might appropriately be provided by a parent or carer. In cases of medical procedures, such as catheterisation, qualified health professionals should be called upon to provide training. Designated staff may require training in safe moving and handling. This will enable them to feel competent and confident and ensure the safety and well being of the child/young person. It is imperative for the school and individual staff to keep a dated record of all training undertaken.

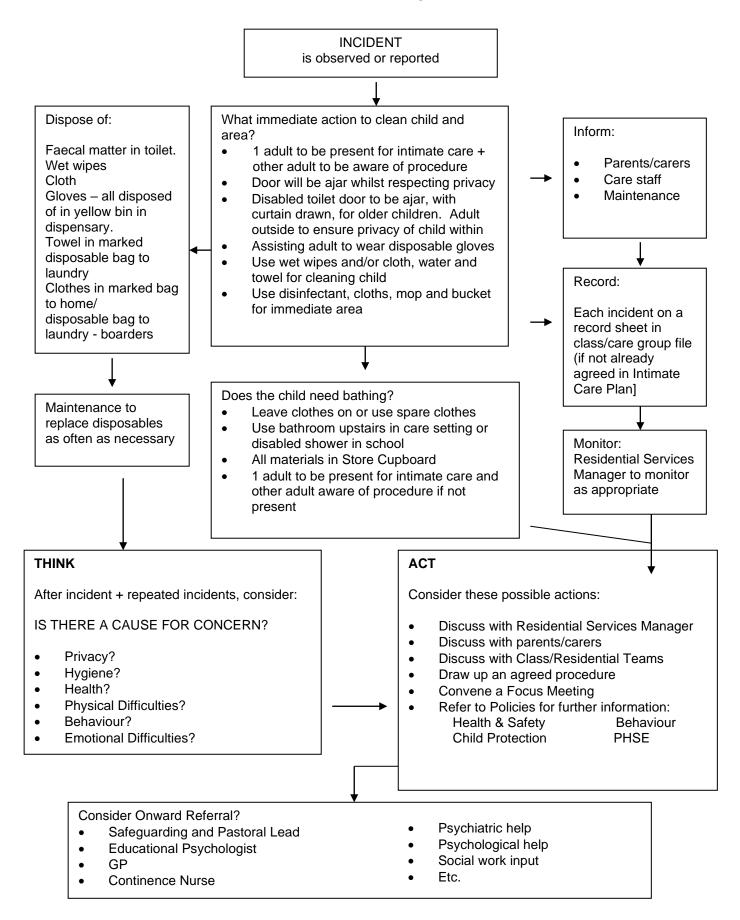
For any child/young person requiring intimate or personal care, it is recommended as good practice that this be discussed with the Residential Services Manager.

Managing Risk:

These guidelines aim to manage risks and ensure that staff 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 Care Plan being written with, and signed by parents/carers
- The presence of two adults when invasive medical procedures are performed

Incontinence Management



Intimate Care/Toileting Plan

Record of Discussion with Parents/Carers

Child/Young Person's name:	D.O.B:	Date agreed:

	Details	Action
Arrangements for Nappy/pad		
changing:		
e.g. who, where, arrangements		
for privacy		
Arrangements for		
washing/cleaning intimate		
areas		
e.g. supporting young person,		
total support needed, who,		
where		
Infection Control:		
e.g. wearing disposable gloves,		
nappy disposal		
Sharing Information:		
e.g. if the child/young person		
has a rash or any marks, family		
customs/cultural practice		
Resources Needed:		
e.g. special seat, nappies/pull		
ups, creams, disposable sacks,		
change of clothes, toilet step,		
gloves and who to provide e.g. school or home		
school or nome		
Signed:		Review Date:
		Date:
Parent/Carer:		
Staff:		
Stan.		

MS032 Intimate Personal Care & Toileting Policy



Consent for Intimate Care delivered by staff at Meath School

I/we give consent for intimate care to be to be given to our child when the need arises.

Signed.....

Date.....

Useful notes on intimate care:

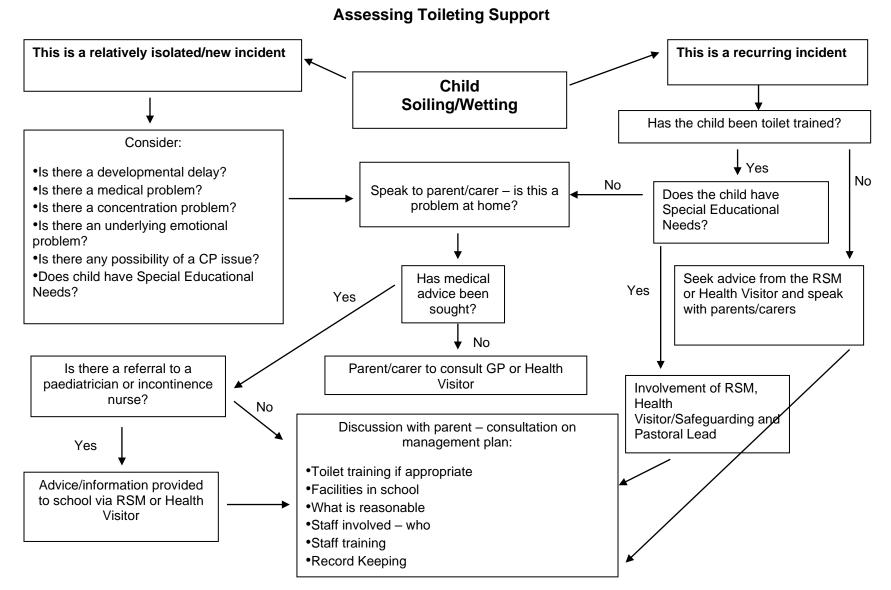
https://icancharity.sharepoint.com/sites/Meath/Administration/POLICY/Current Meath Policies/032 Initimate Personal Care & Toileting/032 Intimate Personal Care & Toileting.doc

Record of Intimate Care Intervention

CHILD/YOUNG PERSON'S NAME:

Date	Time	Procedure	Staff Signature	Print Name	Comments

Only to be used if outside an agreed Care Plan



NB: Always be aware of the possibility of Child Protection issues (in which case follow Child Protection Procedures)

https://icancharity.sharepoint.com/sites/Meath/Administration/POLICY/Current Meath Policies/032 Initimate Personal Care & Toileting/032 Intimate Personal Care & Toileting.doc

MS032 Intimate Personal Care & Toileting Policy

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