# Intimate Care Policy

## (Including massage)

WATERGATE SCHOOL

'I Can, You Can, Together We Will'

**Implemented:** September 2016
**Reviewed & updated:** September 2026
**Date of Next Review:** September 2028

# Intimate Care Policy – Watergate School

All children at Watergate School have the right to be safe and be treated with dignity, respect and privacy at all times in order to enable them to access all aspects of their learning and learn to become as independent as possible in their self-care routines. Owing to the significant learning needs of the pupils in Watergate School intimate care routines occur regularly on a daily basis.

This policy sets out clear principles and guidelines about supporting intimate care with specific reference to toileting. It should be considered in line with the schools Safeguarding Policy, Health and Safety Policies and Administering of Medicines policy. These principles and procedures apply to everyone involved in the intimate care of children. ***'Intimate care may be defined as an activity required to meet the personal care needs of each individual child in partnership with the parent, carer and the child.***' (9.26, ACPC Regional Policy and Procedures).

This policy supports the safeguarding and welfare requirements of Early Years Foundation Stage (EYFS) 2012 and the Disability Discrimination Act 2005. All staff at the school who carry out intimate care will have been subject to an enhanced Disclosure and Barring Service (DBS) with a barred list check before appointment, as well as other checks on their employment history.

**Intimate Care Tasks –** cover any tasks that involve the dressing and undressing, washing including intimate parts, helping someone use the toilet, changing nappies or carrying out a procedure that requires direct or indirect contact to an intimate personal area.

These tasks occur regularly for all pupils throughout the day at Watergate, with some pupils requiring full support in all their hygiene and self-care routines.

In the EYFS/ infant department and classes for pupils with Profound and Multiple Learning Difficulties (PMLD), there are ensuite toilet/changing facilities attached to the classroom. In the junior department the toilets and changing facilities are across the corridor from the classrooms. Generally one member of staff supervises or carries out personal care routines with individual pupils. In a school like Watergate it is not feasible to have two staff in attendance unless it is identified in the care plan/manual handling risk assessment for individual pupils. Class teachers are vigilant in their organisation and planning to ensure safety of both pupils and staff. The leadership team and middle managers are vigilant during learning walks around the school on a regular basis. There is a positive value in both male and

female staff being involved with the care of children of either sex. The intimate care of boys and girls can be carried out by a member of staff of the opposite sex.

Watergate School is committed to ensuring that all staff responsible for the intimate care of children will undertake their duties in a professional manner at all times. We recognise that there is a need to treat all our children with respect when intimate care is given. No child will be attended to in a way that causes distress or pain and adults and staff will be sensitive to each child's individual needs.

Intimate care is any care which involves one of the following:

1. Assisting a child to **change his/her clothes**
2. **Changing or washing a child** who has soiled him / herself
3. Assisting with **toileting** issues
4. Supervising a child involved in their own **intimate self-care**
5. Providing **first aid** assistance
6. **Providing comfort** to an upset or distressed child
7. **Feeding** a child
8. Providing **oral care** to a child
9. Massage (as part of the curriculum) and for which risks have been assessed
10. Assisting a child who requires a specific **medical procedure** and who is not able to carry this out unaided. *

* In the case of a specific procedure only a person suitably trained and assessed as competent should undertake the procedure, (e.g. the administration of rectal diazepam.) Parents have the responsibility to advise the school of any known intimate care needs relating to their child. Pupils who require emergency medication have a care plan that is devised by the school nursing team which should be followed.

**Principles of Intimate Care**

The following are the fundamental principles of intimate care upon which our policy guidelines are based:

- Every child has a 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;
- All children have the right to be involved and consulted in their own intimate care to the best of their abilities;
- All children have the right to express their views about their own intimate care and to have their views taken into account; and
- Every child has the right to have levels of intimate care that are appropriate and consistent.

**Partnership with Parents/Carers**

Staff at Watergate work in partnership with parents/ carers to provide care appropriate to the needs of the individual child. As most pupils at Watergate school require support in their intimate care 'general' principles are applied. For some pupils a personal care plan may be devised in consultation with the parents and relevant professionals, where appropriate. The care plan will set out :

- What care is required
- Number of staff needed to carry out the task (if more than one person is required, reason will be documented)
- Additional equipment required
- Child's preferred means of communication (e.g. visual, verbal). Agree terminology for parts of the body and bodily functions
- Child's level of ability i.e. what tasks they are able to do by themselves
- acknowledge and respect for any cultural or religious sensitivities related to aspects of intimate care
- Be regularly monitored and reviewed in accordance with the child's development

Parents/Carers are asked to supply the following:-

- Spare nappies
- Spare Clothes
- Spare underwear
- Personal/individual creams as appropriate

**Best Practice –** When intimate care is provided, the member of staff will explain / provide commentary/ visual support / touch cue, as appropriate to the individuals preferred means of communication, to enable them to understand and participate at their own level of development. Staff encourage children to do as much for themselves as they can to learn the skill/routine. Praise and encouragement is provided for the child when they achieve or work towards personalised learning objectives for self- care.

It is the responsibility of all staff caring for a child to ensure that they are aware of the child's method and level of communication. Depending on their maturity and levels of anxiety children may communicate using different methods - words, signs, symbols, body movements, eye pointing, etc. To ensure effective communication we will :

- Make eye-contact at the child's level;
- Use simple language and repeat if necessary/ use of symbols/visual cues

- Wait for response;

- Continue to explain to the child what is happening even if there is no response; and
- Treat the child as an individual with dignity and respect.

Staff who provide intimate care are trained to do so (including Child Protection and Health and Safety training in moving and handling when appropriate) and are fully aware of best practice. Equipment will be provided to assist with children 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 taking into account developmental changes such as the onset of puberty and menstruation. Wherever possible staff who are involved in the intimate care of children will not usually be involved with the delivery of sex and relationship education to their children/young people as an additional safeguard to both staff and children/young people involved.

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. The child is aware of each procedure that is carried out and the reasons for it.

As a basic principle children will be supported to achieve the highest level of autonomy 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 as appropriate to suit the circumstances of the child. These plans include a full risk assessment to address issues such as moving and handling, personal safety of the child and the staff and health.

Each child's right to privacy will be respected. Careful consideration will be given to each child's situation to determine how many staff might need to be present when a child needs help with intimate care.

Wherever possible the same child will not be cared for by the same adult on a regular basis; there will be named staff members known to the child who will take turns in providing care. This will ensure, as far as possible, that over-familiar relationships are discouraged from developing, while at the same time guarding against the care being carried out by a succession of completely different staff.

Parents/staff will be involved with their child's intimate care arrangements on a regular basis; a clear account of the agreed arrangements will be recorded on the child's care plan. The needs and wishes of children and parents will be carefully

considered alongside any possible constraints; e.g. staffing and equal opportunities legislation

**Basic hygiene procedures for staff engaged intimate care.**

- Always wear protective disposable gloves and aprons provided
- Seal any soiled clothing in a plastic bag for return to parents.
- Place waste materials into the yellow bags in toilet/changing facility bins.

**Safeguarding –** Staff are regularly trained on the signs and symptom of child abuse and are aware of the DFES booklet 'What to do if you think a child is being abused' and will follow the guidance given.

If a member of staff is concerned about any physical or emotional changes, such as marks, bruises, soreness, distress etc they will inform the Safeguarding Designated Officer (SDO) immediately. The Safeguarding Policy will then be implemented.

Should a child become unhappy about being cared for by a particular member of staff, the SDO/ class teacher will look into the situation and record any findings. These will be discussed with the child's parents/carers in order to resolve the problem. If necessary the SDO will seek advice from other agencies. (Please remember that parental permission is needed before talking to any agency about a specifically named child.)

If a child makes an allegation against a member of staff, or staff have a concern that is reported, the procedure set out in the Safeguarding Policy will be followed.

**Dealing with body fluids –** Urine, faeces, blood and vomit will be cleaned up immediately and disposed of safely by following school hygiene protocols. When dealing with body fluids , staff wear protective clothing (disposal plastic gloves and aprons are provided). Staff should wash themselves thoroughly afterwards using soap and water using hand-hygiene protocols. Soiled children's clothing with be bagged to go home and rinsed through as appropriate. Children will be kept away from the affected area until the incident has been completely dealt with.

All staff should maintain a high standard of personal hygiene, and will take all practicable steps to prevent and control the spread of infection. Hand-hygiene is essential in this process.

This policy aims to manage risks associated with toileting and intimate care needs and ensures that employees do not work outside the remit of their responsibilities set out in this policy.

***This policy will be reviewed every three years in line with school policy.***