

Intimate Care Protocol For children and young people

| Updates/changes to policy | Comments on progress/further development | | | | | |
|---------------------------|--|--|--|--|--|--|
| Autumn 2008 | Policy reviewed and updated as part of Pupil/student Protection policy | | | | | |
| SLT | review | | | | | |
| | Policy presented to and ratified by Governors | | | | | |
| Jan 2010 | • Intimate care policy example off Cheshire West site, adopted. | | | | | |
| Feb 2010 | Completed LA audit and draft policy guidance discussed/shared with | | | | | |
| J.Mills | Headteacher/CP governor/SIP/LAC governor/sample of parents and carers | | | | | |
| SLT | | | | | | |
| Maria Harries | | | | | | |
| Trish Richards | | | | | | |
| March 2010 | Draft Policy amended/updated following consultations and presented to | | | | | |
| J.Mills | Governors | | | | | |
| May 2010 | Policy finalised (as part of Safeguarding Policy and Procedures) – ratified by | | | | | |
| | Governors | | | | | |
| April 2011 | Reviewed, no changes. | | | | | |
| Summer 2012 | Reviewed, no changes | | | | | |
| Summer 2013 | Reviewed – names altered | | | | | |
| Dec 2013 | Reviewed to ensure policy is in line with New Safeguarding policy published | | | | | |
| | by CWAC (Oct 2013) | | | | | |
| March 2014 | Protocol reviewed with Parents. | | | | | |
| | Protocol approved by SLT | | | | | |
| June 2015 | Policy reviewed and checked against new 'Keeping Children Safe in | | | | | |
| | Education' document | | | | | |
| March 2016 | Policy reviewed and updated re names | | | | | |
| Autumn 2016 | Policy reviewed. | | | | | |
| Summer 2017 | Policy reviewed | | | | | |
| Summer 2020 | Policy reviewed – names/roles/review dates removed and updated | | | | | |
| | references to documents | | | | | |
| January 2021 | Policy reviewed – updated KCSIE refs to 2020 and updated name of CWAC | | | | | |
| | website to cheshirewestscp.co.uk | | | | | |
| November 2022 | Policy reviewed – no changes | | | | | |
| September 2023 | Policy reviewed. Changes to KCSIE date. Reference to staff working on a | | | | | |
| | rota basis and using visual symbols to support understanding. Reference | | | | | |
| | to sharing with parents/signed by parents. Updated moving & handling | | | | | |
| | and risk assessment template. | | | | | |

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INTRODUCTION

Dorin Park School values all members of the school community equally.

We strive to ensure that each pupil/student feels valued and learns to value others.

We encourage our pupils/students to seek high standards by providing education of the highest quality, enabling them to develop their potential as independent individuals.

Staff who work with pupils/students who have special needs understand that the issue of intimate care is a difficult one and will require staff to be respectful of pupil/students' needs.

Intimate care can be defined as care tasks of an intimate nature, associated with ...

- bodily functions
- body products
- personal hygiene

Any of these may require direct or indirect contact with or exposure of the genitals/private parts of the body.

Examples include care associated with continence and menstrual management as well as more ordinary tasks such as help with washing or bathing.

Safeguarding

Dorin Park School is committed to ensuring that all staff responsible for the intimate care of pupils/students will undertake their duties in a professional manner at all times.

We recognise that there is a need to treat all pupils/students with respect when intimate care is given. No pupil/student should be attended to in a way that causes distress or pain.

Pupils/students dignity will be preserved and a high level of privacy, choice and control will be provided to them. If a pupil/student becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be looked into and outcomes recorded.

Where appropriate, 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 pupil/student's needs remain paramount. Further advice will be taken from outside agencies if necessary.

Staff who provide intimate care to pupils/students have a high awareness of safeguarding issues. Staff behaviour is open to scrutiny and staff work in partnership with parents/carers to provide continuity of care to pupils/students wherever possible. If a pupil/student makes an allegation against a member of staff, all necessary procedures will be followed [see the Safeguarding Procedures].

Personal Safety is delivered as part of Personal, Social and Health Education, to all pupils/students as appropriate to their developmental level and degree of understanding.

This work is shared, in the appropriate manner, with parents who are encouraged to reinforce the personal safety messages within the home.

If a member of staff has any concerns about physical changes in a pupil/student's presentation, e.g. marks, bruises, soreness etc. s/he will immediately report concerns to the appropriate manager/designated person for Safeguarding.

A clear record of the concern will be completed and referred to social care and/or police if necessary. Parents will be informed that a referral is necessary prior to it being made **unless doing so is likely to place the pupil/student at greater risk of harm.** [See the Safeguarding Procedures].

Our approach to best practice

All Dorin Park all staff have eDBS clearance.

Individual intimate care plans will be drawn up, by the pastoral staff/continence team/other professionals, as appropriate to suit the circumstances of the pupil/student.

These plans include a full risk assessment to address issues such as moving and handling, personal safety and health of the pupil/student/the carer.

Parents/Carers contributions to Personal Care plans is an essential part of ensuring the appropriate level of personal care. Parent contributions are gathered at admissions meetings.

These plans are regularly reviewed by the pastoral staff/staff providing the care, to maintain the appropriate level of care at all stages of the pupils/students development. The level of care may vary through the years, or may increase/decrease during the year according to the pupils'/students' needs. Care plans are shared with parents and a signed copy requested to store in school.

Depending on circumstances and the pupil/student, wherever possible and practical, the same pupil/student **will not be cared for, by the same adult on a regular basis.** The continence team staff member rotate on a half-termly basis. 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 carers.

All pupils/students who require intimate care are treated respectfully at all times; the pupils/students welfare and dignity is of paramount importance.

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

More than one adult may be involved in the personal care of a pupil/student.

Where appropriate (e.g. semi-independent pupils/students) pupils/students will be cared for by one adult unless there is a sound reason for having two adults involved in the care, in order to protect the pupil/students dignity. In such a situation, other staff will be alerted to the support given to those developing their independence in self-care. This will form a part of the risk assessment and care plan.

At times, as appropriate to their risk assessments, 2 or more adults may be present. If this is the case, the reasons will be clearly documented in the care plan.

Staff who provide intimate care are fully aware of best practice and ensure they and others working with them adhere to policy guidelines. (Including Safeguarding and Health and Safety training in moving and handling) Equipment will be provided to assist with pupils/students 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 pupils/students taking into account developmental changes such as the onset of puberty and menstruation.

Staff will teach and model appropriate behaviour, supporting pupils/students to develop acceptable and safe social skills.

Education Safeguarding Procedures and Inter-Agency Safeguarding procedures will be accessible to staff and adhered to.

Staff will apply common sense to all aspects of touching/intimate care situations. Maintaining pupil/student dignity is to be prioritised at all times.

The development of pupils/students personal care skills

Due consideration is given to the pupils/students abilities as well as ...

- age
- gender
- religion
- ethnic background
- cultural background

The needs and wishes of pupils/students and parents will be carefully considered alongside any possible constraints; e.g. staffing and equal opportunities legislation.

Staff will encourage pupils/students to do as much for themselves as possible to promote independence and self-esteem. Staff will not assist with/carry out personal care tasks that the pupil/student can undertake themselves.

As a basic principle pupils/students will be supported to achieve the highest level of autonomy that is possible given their age and abilities.

Staff will encourage each pupil/student to do as much for themselves as they can. This may mean, for example, giving the pupil/student responsibility for washing or drying themselves.

There is careful communication with each pupil/student who needs help with intimate care in line with their preferred means of communication (verbal, signing, symbolic, etc.) to discuss/negotiate, as appropriate, the pupil/student needs and preferences. This ensures the pupil/student is aware of each procedure that is carried out and the reasons for it.

Where non-verbal communication is the preference of the pupil/student, staff will be at increased awareness of needing to 'read' and respond to reactions. Such as when a pupil/student may be displaying signs of discomfort/anger/distress. Staff will use visual symbols as appropriate to support understanding.

Pupils/students are taught to understand the importance of talking to any trusted adult whenever they have any concerns related to safeguarding, through pastoral support and the PSHE curriculum.

Each pupil/student will have pastoral staff to act as an advocate/s to whom they will be able to communicate any issues or concerns that they may have about the quality of care they receive.

Other adults working with children

Volunteers/work experience students/visitors will not be involved in any personal care procedures and will always work in sight of school staff at all times.

Some touching/physical support may be required to assist pupils to access the curriculum. Where this is required staff will give due consideration to volunteers/work experience students supporting to a lesser degree.

This protocol reflects the policies of Cheshire West's Safeguarding Children Partnership

http://www.cheshirewestscp.co.uk/ and is in line with "Working Together to Safeguard Children" (2018), and 'Keeping Children Safe in Education' (2023) further information can be sought by clicking the links below http://www.workingtogetheronline.co.uk/ https://www.gov.uk/government/publications/working-together-to-safeguard-children--2 https://www.gov.uk/government/publications/keeping-children-safe-in-education--2

... and adheres to the standards set out in the following documents...

- The Education Act, 2002, HM Guidance
- Keeping Children Safe in Education, 2023
- Working Together to Safeguard Children, 2018
- The Statutory Framework for the Early Years Foundation Stage

DORIN PARK STUDENT MOVING & HANDLING AND PERSONAL CARE RISK ASSESSMENT

| Pupil Name | | | | | | | |
|------------------------|-----|---------------------------------------|--|--|--|--|--|
| Handling Constraints | | | | | | | |
| Uncontrolled Spasm | | Epilepsy | | | | | |
| Poor Head control | F | laccid limbs | | | | | |
| Fragile Bones | | Impaired | | | | | |
| | | balance | | | | | |
| No upper limb function | Ge | eneral fragility | | | | | |
| Spinal fusion | | Cultural | | | | | |
| Behavioural Issues | Vis | sually/Hearing | | | | | |
| | | impaired. | | | | | |
| Additional comments: | | · · · · · · · · · · · · · · · · · · · | | | | | |
| | | | | | | | |

| Activity | Independent | Supervised/ Promoted | Assisted | Dependent | Hoisted | Handling Techniques and Equipment to be used |
|------------------------------------|-------------|-------------------------|----------|-----------|---------|---|
| Transport | | | | | | |
| Toileting/Changing | | | | | | |
| Moving Around School | | | | | | |
| Feeding | | | | | | |
| Outside play | | | | | | |
| Standing | | | | | | |
| Use of Sensory Room/classroom | | | | | | |
| Physical assistance required | | | | | | |

| | | · · · · | | | | |
|--|--|---------|--|--|--|--|
| Swimming | | | | | | |
| Visits | | | | | | |
| Toilet training and equipment needed | | | | | | |
| Emergency arrangements to be used when normal techniques are not possible. | | | | | | |
| Personal care | | | | | | |
| Strategies and communication needed in the bathroom | | | | | | |
| Equipment needed in bathroom | | | | | | |
| Additional health/ behaviour/ other risks | | | | | | |
| Assessment completed by | | | | | | |
| Date of assessment | | | | | | |

Adopted from CWAC.