

Westhouses Primary School

Derbyshire Children and Young Adults Personal and Intimate Care Policy



Revision History

REVISION	DATE	NAME	DESCRIPTION
1.0	01.07.2018	Juliette Whitby	
2.0	01.07.2021	Juliette Whitby	No changes
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Approval History

REVISION	APPROVAL DATE	APPROVED BY	SIGNED
1.0	15.07.2018	L.Gregory	
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3.0	01.07.2023	S.Taylor	
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Introduction

Westhouses Primary School is committed to providing the highest quality care, which meets the individual needs of children, and promotes their dignity, privacy and independence.

Aims

This policy has the following aims:

- To safeguard the rights of children and young people and staff who are involved in providing personal and intimate care.
- To ensure inclusion for all children and young people
- To ensure continuity of care between parents/carers and involved professionals.
- To ensure all staff involved in personal and intimate care have access to appropriate training.

Definitions

Personal care is defined as those tasks which involve touching, which is more socially acceptable, and is non-personal and intimate, and usually has the function of helping with personal presentation and enhancing social functioning. This includes shaving, skin care, applying external medication, feeding, administering oral medication, hair care, brushing teeth, applying deodorant, dressing and undressing, washing non-personal body parts, and prompting to go to the toilet.

Intimate care is defined as those care tasks associated with bodily functions, body products, and personal hygiene which demand direct or indirect contact or with exposure to the genitals, including dressing and undressing (underwear), helping with the use of the toilet, changing continence pads (faeces and/or urine), bathing/showering, washing personal and intimate parts of the body, changing sanitary towels or tampons, inserting suppositories, giving enemas.

Guiding principles

This policy is underpinned by the following guiding principles:

- Assistance with intimate and personal care must be provided in a manner which is respectful of the child's rights to feel safe and secure, to remain healthy, and to be treated as an individual.
- Children have a right to information, in a format which is understandable, about how to ask a question or make a complaint about personal and intimate care.
- Children should be consulted and encouraged to participate in decision-making about their intimate and personal care. Particular attention must be given to those children and young people who have disabilities/conditions which mean they require additional support to do this.
- Decisions and plans about intimate and personal care are made in partnership with parents/carers.

Links with other policies

This policy should be considered in conjunction with other relevant policy statements, related to the following aspects:

- Safeguarding
- Administration of medication
- Health and Safety
- Equality and diversity

Ensuring carer competency

- Staff need to be given information during the recruitment process about the types of intimate and personal care they may be required to carry out.
- All staff working with children and young people must have been through an appropriate safer recruitment process.
- Staff need to be given appropriate and ongoing training in how to carry out intimate and personal care activities. This may include both generic training, and specific instruction in how to assist particular children.
- Staff should have access to a set of procedures which give detailed guidance on how to carry out specific activities related to intimate and personal care.
- Staff should also have attended other relevant training, including safeguarding, moving and handling (where appropriate), and administration of medication.

Safeguarding the dignity of children when providing intimate care

- The number of carers involved with giving intimate and personal care should be indicated in the care plan, and should be based on individual need. Under normal circumstances, the child's need for privacy would indicate that one carer is sufficient. However, two or more carers may be required on occasion, for

example where this is necessary to support children with behavioural needs, or where more than one carer is needed to assist with moving and handling. Where more than one carer is present the reasons must be clearly documented.

- There is a need to strike a balance between protecting the child's dignity by not drawing on too large a pool of carers, and on the other hand, protecting the child from over-dependence on one carer.
- The child's preferences about gender of carer should be respected wherever possible.
- Services and settings need to make provision for emergencies such as a member of staff on sick leave.

Developing, documenting, and communicating intimate and personal care plans

- Children should be included as far as possible in developing personal and intimate care plans.
- Parents/carers must be consulted, and their views respected regarding personal and intimate care needs, unless the young person is living independently.
- Parents are expected to provide services with information about their child/young person's intimate care needs. This information will be sought as part of the assessment process and forms the basis of the care plan.
- Relevant members of the multi-professional team must be consulted as plans are developed; this may include nursing professionals, and therapists.
- Information about how to meet intimate and personal care needs must be documented as part of the care plan, which should be developed in partnership with parents/carers and involving the child; this plan must be made available to the staff giving assistance.
- Where a personal and intimate care plan exists, this information must be shared with all relevant services on request.
- Care plans must be regularly reviewed and amended in the light of changes in the child's needs.
- Planning for outings and trips must take into account how the child's intimate and personal care needs will be met when away from the setting.
- Personal and intimate care plans should include opportunities to promote independence skills.

Monitoring and reviewing

This policy will be reviewed on 19.09.2026 or if changes are deemed necessary.

Guidance for personal and intimate care procedures

General guidance

The following general guidance should be followed:

- Opportunities to develop and use social skills should be integrated within intimate and personal care routines.
- Children should be enabled to communicate their needs and preferences during personal and intimate care activities.
- When referring to care routines or body parts care should be taken to use appropriate language.
- Where staff are uncertain how to carry out an activity, guidance should be sought.
- The intimate and personal care plan must be checked before assistance is given.
- Care must be taken to communicate with the child throughout the activity; in particular look for signs of assent/dissent.
- Children should be encouraged to do as much as they can for themselves.
- The utmost care must be taken to ensure dignity and privacy. This includes ensuring that doors are closed, or screens are used if 2 young people are sharing the use of a bathroom area. Carers should also keep the body and genital area covered as much as possible.
- The Personal Handling Risk Assessment and handling Plan should be referred to for information about transfer methods to be used during care routines.
- Personal protective equipment (plastic apron and gloves) should be used during intimate care procedures.
- The young person's own toiletries should be used, if these are available.

Changing incontinence pads/ nappies/pull-ups.

When changing incontinence pads the following guidance should be followed:

- Remove lower body clothing
- Remove incontinence material and place in plastic bag for clinical waste
- **DO NOT PUT USED WIPES BACK INTO THE BOWL, PLACE INTO PLASTIC BAG FOR CLINICAL WASTE AND CONTINUE WITH CLEAN WIPES FOR EACH AREA**
- Clean, wash and dry stomach and genital area, then buttocks and anus, taking care to wipe from the front towards the back especially for females
- Place incontinence pad under young person's bottom. The personal handling plan will normally indicate this is to be done by rolling the person. It is not acceptable to lift both legs at the same time (unless assisting a baby).

- Change gloves if applying Sudacreme, Vaseline etc.
- **DO NOT PUT HAND BACK INTO POT A SECOND TIME WITHOUT CHANGING GLOVES**
- Fasten pad ensuring it is comfortable
- Remove gloves
- Dress lower body
- Dispose of all waste in line with local disposable of clinical waste guidelines.
- Wash your hands
- Make sure the young person is comfortable.