

# Elkesley Primary & Nursery School



## Personal and Intimate Care Policy

(Policy Number 65)

Compiled by	Miss Price	June 2019
Agreed by	Staff	
Approved by	Governors	
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# Nottinghamshire County Council Children and Young People’s Department

## POLICY FOR PERSONAL AND INTIMATE CARE

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### Introduction

The children and young people’s department is committed to the provision of care that is high quality and meets the individual needs of children and young people and embraces ‘Every Child Matters’ and the United Nations Convention on the Rights of the Child.

This policy provides the outline for the development of guidance and procedure with regard to personal and intimate care. This policy should be read in conjunction with the policy for Managing Complex Health Care Needs and Managing Medicines.

**This policy applies to all staff undertaking personal and intimate care tasks with children and young people. In the context of this policy staff will include approved volunteers.**

**Nottinghamshire Children and Young People’s Department requires all service areas where needed to develop guidance in line with this policy.**

**The Children and Young People’s Department is committed to providing personal and intimate care where it has been recognised as an assessed need and indicated in the personal and intimate care plan, in ways that embrace ‘Every Child Matters’ and the united Nation Convention on the Rights of the Child.**

- Every child and young person has the right to feel safe and secure
- Every child and young person has the right to be treated as an individual
- Every child and young person has the right to remain healthy
- Every child and young person has the right to privacy, dignity and a professional approach from all staff when meeting his or her needs.

- Every child and young person has the right to information, in a format that is understandable, and support relevant to their needs, which will enable him or her to make informed and appropriate choices.
- Every child and young person has the right to be accepted for who they are , which is inclusive of their age, gender, ability, race, culture, religion or belief and sexual orientation
- Every child and young person has the right to information and procedure, in a format that is understandable, for any complaint or queries he or she may have regarding their personal and intimate care.

**Every child and young person should be encouraged to care for themselves as much as they are able.**

**The Children and Young People Department accepts that there will be extraordinary circumstances, following a careful risk assessment, where a child or young person's personal care can not be met in a particular activity. It is expected that an alternative will be sought.**

## **Aims**

The aims of this policy are:

- To ensure that children and young people are consulted and encouraged to participate in decisions about their personal and intimate care. Particular attention must be given to those children and young people who have disabilities/conditions who may need additional support to be able to do this.
- To safeguard the rights of children and young people, and staff who are involved in their personal and intimate care.
- To ensure that service specific guidance is developed. This must inform all staff, whose role includes personal and intimate care, of good working practice and procedures.
- To ensure there is a system for producing Intimate Care Plans for children and young people who require personal and intimate care. (Example personal and intimate care plan proforma Appendix A).
- To ensure that all staff who are involved in personal and intimate care have access to training enabling them to implement the child or young person's intimate care plan and all relevant procedures.
- To remove barriers to learning and participation, protect from discrimination and ensure inclusion for all children and young people.

- To ensure the continuity of care through the sharing of information between parents/carers/legal guardian/involved professionals.

## **Definitions of Personal and Intimate Care**

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

## **Equality and Diversity**

Children and young people with impaired personal development have the same rights of access to services as other children and young people and are protected from discrimination under the Disability Discrimination Act (DDA) 1995.

## **Protection of Children Young People and Staff**

All services must ensure that all children and young people's personal and intimate care needs are met.

**Parents/carers/legal guardian have the prime responsibility for their child's health and must provide all services with information about their child or young person's intimate care needs. This information will be sought through an assessment of the child or young person's needs and subsequent personal and intimate care plans will be drawn up with review dates.**

- 5.2 The personal and intimate care plan must be written in consultation with parents/carers/legal guardian, children and young people and appropriate consent given for procedures within it. Every effort must be made to assist those children and young people who are not able to communicate easily to participate in their care planning.
- 5.3 Where a personal and intimate care plan exists this information must be shared with all relevant services upon request.

- 5.4 Where a personal and intimate care plan does not exist, the initial service identifying the need must ensure that an assessment and plan are completed prior to accessing the service, or where the child or young person's needs or circumstances change.
- 5.5 Young people over the age of 16 who are living independently of their parents should provide information about their personal and intimate care needs. Those young people with a disability/condition must be provided with additional support to be able to do this where possible.
- 5.6 Parents/carers/legal guardian must be consulted and their views respected in terms of the personal and intimate care provided for their child or young person unless the young person is living independently. Procedures must be discussed with the family to ensure consistency of care and support to encourage the development of personal and intimate care skills for their son or daughter.
- 5.7 There is no legal or contractual duty that requires all service staff to undertake personal and intimate care procedures. However this may already be a specific requirement in an individual job description or staff may formally elect to support children and young people in this way. In these circumstances staff will be informed of the specific types of personal and intimate care that they will be required to carry out and be appropriately trained.
- 5.8 Relevant staff will have access to guidance and ongoing training that supports good working practice which complies with health and safety legislation. Staff will have access to a set of procedures detailing individual personal and intimate care tasks including how to manage children and young people who refuse to comply with previously agreed interventions.
- 5.9 All staff working with children and young people must have been through an appropriate safer recruitment process.
- 5.10 In recognition of the vulnerability of disabled children and young people all services must ensure that they follow the Nottinghamshire Safeguarding Children Board Safeguarding Children Procedures. The Safeguarding Disabled Children and Young People Inter-agency Practice Guidance must be accessible to all staff and adhered to.
- 5.11 Each child and young person's right to privacy must be respected. Careful consideration must be given to each child and young person's situation to determine how many carers might need to be present and which carers may be involved when a child or young person needs help with personal and intimate care. Under normal circumstances, one child or young person will be cared for by one adult, unless there is a sound reason for having two or more adults present. If this is the case, the reasons must be clearly documented. (The United Nations Convention on the Rights of the Child: Article 12 Children have the right to say what they think should happen, when adults are making decisions that affect them, and have their opinions taken into account).

- 5.12 The number of staff required will be indicated in the child or young person's intimate care plan. The number of staff may also be influenced by the preference of the child or young person, or specified in a manual handling or behavioural risk assessment.
- 5.13 All services need to make provisions for emergencies i.e. a staff member on sick leave.
- 5.14 On the basis that Nottinghamshire County Council's policy for Personal and Intimate Care is followed then Nottinghamshire County Council is protected by its Public Liability Insurance (subject to its terms and conditions and exclusions) for accidental death, injury, damaged caused by such procedures to a third party. The insurance provided jointly indemnifies with the County Council staff and Members provided that they are acting in accordance with their Nottinghamshire County Council duties. For further information contact Risk and Insurance Section, County Hall, 08449 808080.

### **Monitor and Review**

The Children and Young People's Departments Strategic Services Policy, Commissioning and Planning Team will be responsible for promotion of this policy across the Department. Any required changes to this policy due to changes in legislation will be made in partnership with the policy author.

However it is the responsibility of individual service areas to ensure that their staff are made aware of their specific guidance.

### **References/Background Information**

- Management of Health and Safety at work Act 1999
- Disability Discrimination Act (DDA) 1995, 2005
- Equality Act 2010
- Every Child Matters
- Every Disabled Child Matters
- The Dignity of Risk, National Children's Bureau
- Including me, Council for Disabled Children
- U.N Convention on the Rights of the Child
- Nottinghamshire Safeguarding Children Board Child Protection Procedures
- Nottinghamshire Safeguarding Children Board Safeguarding Disabled Children and Young People: Practice Guidance for all agencies.

## **What does this look like at Elkesley Primary and Nursery School?**

We believe that as Education providers we have an obligation to meet the needs of all of our children, including those with delayed personal development in the same way as we would meet the individual needs of children with any other kind of delayed development. Children of statutory school age should not be excluded from normal school activities solely because of incontinence.

This policy sets out our procedures for handling these situations with dignity and kindness to ensure the needs of individual children are met and health and safety and child protection standards are maintained.

## **What happens if a child is admitted to school who is incontinent?**

The school acknowledges that this is a developmental or medical problem and will work with parents to establish a mutually acceptable care and changing plan which is likely to cover the following points:

### **Parents of children of statutory school age or children in EYFS**

- Agreement with parents to ensure that the child is changed at the latest possible time before being brought to the setting/school
- Provision by parents of spare nappies and /or underwear and a change of clothing (for SEN pupils or those recognised as having toileting issues)
- Agreeing the procedures that will be followed when the child is changed at school including the use of any cleanser or the application of any cream
- Agreement that parents inform the setting/school should the child have any marks/rash.
- Agreeing to a 'minimum change' policy i.e. the setting/school would not undertake to change the child more frequently than if s/he were at home.
- Agreement to review arrangements should this be necessary

### **School**

- Agreeing to change the child during a single session should the child soil themselves or become uncomfortably wet
  - Agreeing how often the child would be changed should the child be staying for the full day
  - Agreeing to report should the child be distressed, or if marks/rashes are seen
  - Agreeing to review arrangements should this be necessary.
  - Hygiene Procedures to follow for changing a soiled nappy or soiled underwear/ clothing
- Staff to wear disposable gloves and aprons while dealing with the incident
  - Soiled nappies to be double wrapped, and placed in a hygienic disposal unit
  - Changing area to be cleaned after use
  - Hot water and liquid soap available to wash hands as soon as the task is completed
  - hot air dryer or paper towels available for drying hands

### **Staff Guidelines for dealing with a soiled child**

For children in the Foundation stage the teaching assistant will be responsible for changing the soiled child (the teacher may also but this would be on a voluntary basis). Older children will be supported in cleaning and changing as determined by their level of independence to do so.

**For children requiring support:**

1. The teaching assistant will inform the teacher discretely that they are going to change a child Where staffing allows an additional adult will assist changing. Should a member of staff feel it necessary to have another adult present and no other member of staff is available in class a TA from another class will be sent for.
2. The Teaching assistant will explain to the child what they are going to do to help clean them up.
3. The adult will take the child to the toilet area in the foundation stage or if the child is in an older year to the relevant toilet area, ensuring dignity and privacy are respected
4. The child will normally be asked to stay standing
5. Adult should wear disposable rubber gloves
6. Only essential garments should be lowered or removed
7. Remove soiled pad/ nappy/ underwear
8. When washing or wiping, always do this front to back to prevent infection
9. Ensure skin is dry using wipes (child encouraged to help if able to do so)
10. Replace pad/ nappy/ underwear (child encouraged to help if able to do so)
11. Encourage child to wash and dry hands
12. Tidy and clean changing area disposing of soiled items as per above hygiene guidelines
13. Wash own hands

**One off incidents**

Should a child have a one off accident they will be treated with sensitivity and dignity. Initially the child will be provided with wipes/tissue and a change of clothing (usually from the spare clothing cupboard) and allowed privacy to change and clean themselves. Where the child is distressed or suitable spare clothing is not available the school office will be informed and parents contacted to provide alternative clothes.

**What to do if a child becomes distressed during the changing process**

Talk the child through each step and reassure them that they will feel much better when they are clean. If the distress is such that it is difficult to continue then stop the changing process. If this results in a hygiene issue then parents should be contacted to explain the situation and an agreed course of action established. In any event a record must be made of distress, whether or not the changing was completed and parents informed as soon as possible. If there is any concern re child protection issues these should be dealt with in accordance with school policy.

**What to do if any marks or redness are seen**

If marks or redness are seen then this should be recorded and reported to the child's parents as soon as possible. If there are any child protection concerns these should be dealt with in accordance with school policy

**Access to Relevant Training**

This policy and guidance does not replace the need for appropriate staff training where this is felt necessary and the school will work with parents and relevant agencies to ensure staff are adequately trained for dealing with incontinence issues.

**APPENDIX A**

**INDIVIDUAL ASSESSMENT PERSONAL AND INTIMATE CARE PLAN**

<b>Name</b>		<b>Male</b>	<input type="checkbox"/>	<b>Female</b>	<input type="checkbox"/>
<b>D.O.B</b>		<b>Condition</b>			
<b>School / setting</b>					
<b>Child or young person's preferred method of communication?</b>					
<b>Does the child or young person have any allergies or sensitivity? (Refer to health care plan)</b>					
<b>Does the child or young person require assistance with mobility or transfers (refer to manual handling assessment and subsequent safe systems of work)</b>					
<b>Does the child or young person have any religious or cultural needs?</b>					

<b>PROCEDURE</b>			<b>Named / trained staff</b> e.g. 1:1 / departmental staff
<b>Eating and drinking</b>	Assistance required at mealtimes	<input type="checkbox"/>	
	Supervised at meal times	<input type="checkbox"/>	
	Nasal gastric tube feed	<input type="checkbox"/>	
	Gastronomy feed	<input type="checkbox"/>	
	Continuous pump feed	<input type="checkbox"/>	
	Periodic pump feed	<input type="checkbox"/>	
	Manual feed	<input type="checkbox"/>	
	Other specialist feed	<input type="checkbox"/>	
<b>Airways / suction</b>	Oral	<input type="checkbox"/>	
	Tracheotomy	<input type="checkbox"/>	
<b>Medication: Emergency and / or routine</b>	Epipen	<input type="checkbox"/>	
	Oral	<input type="checkbox"/>	
	Rectal e.g. diazepam, ACE procedure	<input type="checkbox"/>	
	Suppository	<input type="checkbox"/>	
	Supervised medication	<input type="checkbox"/>	
	Administered	<input type="checkbox"/>	
	Supervised	<input type="checkbox"/>	
	Dressings	<input type="checkbox"/>	

<b>Toileting</b>	Rectal procedure e.g. enema	<input type="checkbox"/>	
	Catheterisation	<input type="checkbox"/>	
	Supervised catheterisation	<input type="checkbox"/>	
	Pad change(day and/or night)	<input type="checkbox"/>	
	Menstruation	<input type="checkbox"/>	
	Assistance with toileting	<input type="checkbox"/>	
	Supervised toileting	<input type="checkbox"/>	
<b>Personal care</b>	Washing	<input type="checkbox"/>	
	Showering	<input type="checkbox"/>	
	Dressing	<input type="checkbox"/>	
	Cleaning e.g. gastronomy site	<input type="checkbox"/>	
	Teeth	<input type="checkbox"/>	
	Shaving	<input type="checkbox"/>	
	Hair / styling	<input type="checkbox"/>	
	Lotions / creams	<input type="checkbox"/>	
<b>Behavioural</b>	Social/emotional	<input type="checkbox"/>	
	Sexual awareness	<input type="checkbox"/>	

## SAFE SYSTEM OF WORK

IT IS ASSUMED THAT THE NAMED STAFF FOLLOWING THESE SYSTEMS OF WORK HAVE BEEN TRAINED TO CARRY OUT ALL TECHNIQUES DOCUMENTED

**PROCEDURE:**

**Pupil's level of ability:**

Independent	<input type="checkbox"/>	Fully assisted 1 carer	<input type="checkbox"/>
Independent / supervised	<input type="checkbox"/>	Fully assisted 2 carers	<input type="checkbox"/>
Partially assisted 1 carer	<input type="checkbox"/>	Fully assisted more than 2 carers	<input type="checkbox"/>

**Environment required:**

e.g. adapted bathroom, medical room, bedroom, dining room

**Equipment required:**

e.g. gloves, toiletries, special crockery / cutlery

**Detailed description of procedure:**

**Date assessed:**

**Assessor's signature:**

**Child or young person's signature:**

**Parent / Guardian's signature:**

**Proposed review dates:**