GUIDELINES FOR GOOD PRACTICE IN INTIMATE CARE

All children have the right to be safe and treated with dignity and respect, as set out in the Charter of Children's Rights. Their welfare and dignity are of paramount importance.

Intimate Care can be defined as care tasks of an intimate nature, associated with bodily functions, body products and personal hygiene which demand direct or indirect contact with or exposure of genitals. Examples include nappy changing, feeding, and dressing.

These guidelines are designed to safeguard both pupils and staff, and apply to every member of staff involved with intimate care of pupils.

The guidelines aim to support good practice in intimate care and state that;

1 **Every pupil is treated with dignity and respect and privacy is ensured.**
Every pupil is encouraged to have a positive self-image

For most children, intimate care can be carried out by one staff member alone with one pupil. This should be conducted in privacy for the child. Having people working alone does increase the opportunity for possible abuse, but this is balanced by the loss of privacy and lack of trust implied if two people have to be present if it is not necessary for the child.
There will also always be other staff members around in the changing/toilet area which can act as a deterrent to possible abusers. Staff should be sensitive to the pupil's need for privacy, dignity and gentle handling.

It is important that staff never talk across a child and never talk about them, especially in a derogatory fashion.

Privacy is an important issue. No staff member should walk through an occupied toilet or changing area without making absolutely certain that an interruption is acceptable.

2 **The child is involved as far as possible in their intimate care.**

Close contact and handling should be kept to the minimum necessary to complete the task. Staff should avoid doing things for a child that he or she can do alone, and if a child is able to help, staff must ensure that they are given the chance to do so. It is necessary for staff to support the child in doing all they can for themselves and always to explain to the child what the adult is doing – AT ALL TIMES.

3 **Ensure reactions of the pupil are responded to.**

Staff must ensure that they are responding appropriately to the child by asking them, particularly a pupil the staff member has not previously cared for, if they may help the child or telling them what that staff member will be doing, e.g 'are you ready?', 'I am going to wash you now etc.'. It is necessary to forewarn and prepare the child and behave consistently – this is not necessarily a

time for choices but the child's choice of carer for carrying out intimate tasks should always be respected where practicable.

4 **Intimate care must be as consistent as possible.**

Practitioners are responsible for ensuring that all staff have a consistent approach. This does not mean that everyone has to do things in an identical fashion, but it is important that approaches are not markedly different between different staff eg is changing soiled nappies/vomit often the same staff member?

Wherever possible a child will not be cared for solely by the same adult on a regular basis but by a whole class group. This will ensure that, as far as possible, over-familiar relationships are discouraged from developing, whilst at the same time guarding against the care being carried out by a succession of completely different carers.

5 **Clarification must be sought for any uncertainties.**

If a staff member needs to be shown more than once it is imperative that they ask again. Certain intimate care or treatment procedures must only be given by staff who have been formally trained and assessed as competent. These are included in the Administration Of Medicines Policy.

Children must be supervised at all times in the toilet or changing areas and should never be alone whilst on a changing mat. If a pupil is on a programme eg toilet training or working towards independence, the supervision should be appropriate to the programme and, under these circumstances, it may be valid to leave a child for the amount of time requested in the programme.

6 **Any child protection concerns are reported**.

If, during the intimate care of the pupil a member of staff accidentally injures, scratches, causes distress, the pupil seems unusually sore in the genital area or has a very emotional reaction without apparent cause, any such incident must be reported as soon as possible in line with Child Protection Procedures. The way in which children are physically cared for will give them an understanding of appropriate physical contact which may alert them to inappropriate contacts and help them to respond appropriately as far as they are able.

7 **Volunteers/students/supply staff**

See Child Protection and Safeguarding procedures and Student/Volunteer Guidelines. Staff in these categories should be allowed to familiarise themselves with the pupils before taking part in any personal care – even changing shoes and socks for PE. No students should be allowed to complete intimate care programmes but can take part in personal care such as dressing/undressing for swimming/PE under the supervision of the class staff. As part of an induction, new staff should undertake joint care giving to enable them to familiarise themselves with our approaches.