



# Ravenshall

all different | all equal | all important

## Intimate Care Policy

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# Intimate Care Policy

## Introduction

Staff who work with children or young people\* who have special needs will realise that the issue of intimate care is a difficult one and will require staff to be respectful of children's needs.

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

Children's dignity will be preserved and a high level of privacy, choice and control will be provided to them. Staff who provide intimate care to children\* have a high awareness of safeguarding issues. Staff behaviour is open to scrutiny and staff at Ravenshall School work in partnership with parents/carers to provide continuity of care to children wherever possible.

Staff deliver a full personal safety curriculum, as part of Personal, Social and Health Education, to all children as appropriate to their developmental level and degree of understanding. This work is shared with parents who are encouraged to reinforce the personal safety messages within the home.

Ravenshall 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. Ravenshall School recognises that there is a need to treat all children with respect when intimate care is given. No child should be attended to in a manner which may cause distress or pain.

## Our approach to best practice

In Foundation Stage, Key Stages 1 and 2, intimate care may be appropriately delivered by cross gender support (where all parties feel comfortable with that arrangement).

**In Key Stages 3 and 4, where it is vital to maintain pupil's dignity, intimate care will only be delivered by same gender members of staff; cross gender delivery of intimate care is unacceptable in everyday practice.** If instances of **genuine** emergency arise, cross gender care may only be delivered by 2 members of staff.

All children who require intimate care are treated respectfully at all times; the child's welfare and dignity is of paramount importance.

Staff who provide intimate care are trained to do so (including access to Safeguarding issues and Health and Safety training in moving and handling) and are fully aware of best practice. This training may be delivered by partner agencies and is often 'cascaded' within the staff team. Apparatus will be provided to assist with children who need special arrangements following assessment from physiotherapist/ occupational therapist as required, e.g. hoists and slings.

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 education to their children as an additional safeguard to both staff and children involved.

There is careful communication with each child who needs help with intimate care in line with their preferred means of communication (verbal, sign, 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 that is 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.

Parents/carers alongside the class teacher will be involved with their child's intimate care arrangements on a regular basis; a clear account of the agreed arrangements will be recorded through an intimate care agreement and may include a full risk assessment to address issues such as moving and handling, health and personal safety of the child and the carer. The needs and wishes of children\* and parents will be carefully considered alongside any possible constraints; e.g. staffing and equal opportunities legislation.

Each child's right to privacy will be respected. Careful consideration will be given to each child's situation to determine how many carers might need to be present when a child needs help with intimate care. Where possible a child will be cared for by 2 adults of same gender with whom the child has a good relationship. By necessity a number of staff will need to be trained to deliver such care although attempts will be made to restrict daily contact to the same familiar faces.

Each child will have a Key stage leader to act as an advocate to whom they will be able to communicate any issues or concerns that they may have about the quality of care they receive.

### **The protection of children**

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

Where appropriate, all children will be taught personal safety skills carefully matched to their level of development and understanding.

If a member of staff has any concerns about physical changes in a child's presentation, e.g. marks, bruises, soreness etc. s/he will immediately report concerns to the appropriate manager/ Designated Safeguarding Lead. A clear record of the concern will be completed and referred to social services and/or police if necessary. Parents will be asked for their consent or informed that a referral is necessary prior to it being made unless doing so is likely to place the child at greater risk of harm.

If a child becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be looked into and outcomes recorded. 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 child's needs remain paramount. Further advice will be taken from outside agencies as necessary.

If a child makes an allegation against a member of staff, all necessary safeguarding procedures will be followed.

\* where 'child or children' are mentioned in this document, this refers to any child or young person under the age of 18.

<b>Change management log</b>		
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1.0	Reviewed formatting	10.11.23