



Policy reviewed on 1.11.2017

Intimate Care Policy

Introduction

The Exwick Ark 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. We recognise that there is a need to treat all children with respect when intimate care is given. No child should be attended to in a way that causes distress, embarrassment or pain.

Definition

Intimate care is any care which involves nappy changing, washing, touching or carrying out an invasive procedure (such as cleaning up after a child has soiled him/herself) to intimate personal areas. In most cases such care will involve procedures to do with personal hygiene and the cleaning of equipment associated with the process as part of a staff member's duty of care. In the cases of specific procedure only staff suitably trained and assessed as competent should undertake the procedure, (e.g. the administration of rectal diazepam).

Our Approach to Best Practice

The management of children with specific intimate care needs will be carefully planned. The child who requires intimate care is treated with respect at all times; the child's welfare and dignity is of paramount importance.

Staff who provide intimate care are trained to do so (including Child Protection, Health and Safety, and Manual Handling - Moving and Handling) and are fully aware of best practice. The child 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 him/herself as he/she can. This may mean, for example, giving the child responsibility for washing themselves. Individual intimate care plans will be drawn up for particular children as appropriate to suit the circumstances of the child.

Each child's right to privacy will be respected. The child's family worker will change their nappy and provide other intimate care, unless they are not present. Normally one child will be toileted and cared for by one adult unless there is a sound reason for having more adults present. If this is the case, the reasons should be clearly documented on an Intimate Care Plan.

Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the parent consultation form and on the child's Intimate Care Plan, if they have one. The needs and wishes of children and parents will be taken into account wherever possible within the constraints of staffing and equal opportunities legislation.



The Protection of Children

Child Protection Procedures and Multi-Agency Child Protection procedures will be adhered to.

All children will be taught personal safety skills carefully matched to their level of ability, 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 person for child protection. 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 if necessary.

If a child makes an allegation against a member of staff, all necessary procedures will be followed (see Multi - Agency Child Protection Procedures for details)

All staff will be required to confirm that they have read the Devon County Council document 'GUIDANCE ON TOILETING AND PROVISION OF INTIMATE CARE FOR CHILDREN IN NURSERY AND RECEPTION CLASSES January 2011' and understand the need to refer to other policies the setting holds for clarification of practices and procedures.

Signed: