



CLOUGHWOOD ACADEMY

Personal Hygiene & Intimate Care Policy

| Version and Date | Author | Committee Responsible | Review frequency | Approval | Next Review Due | |
|------------------|------------|-----------------------|------------------|----------|----------------------------------|------------|
| 1 | 15.10.2022 | C Clarke | LGB | Annually | Approved at LGB on 30.11.2022 | 15.10.2023 |
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Aims

- To safeguard the rights and promote the welfare of children
- To provide guidance and reassurance to staff
- To assure parents/carers that staff are knowledgeable about personal care and that their individual concerns are taken into account.

Principles

- Every child has the right to feel safe and secure
- Every child has the right to be treated as an individual
- Every child has the right to remain healthy
- Every child has the right to privacy, dignity and a professional approach from all staff when meeting his or her needs
- Every child has the right to information and support that will enable him or her to make informed and appropriate choices
- Every child has the right to be accepted for who they are, without regard to age, gender, ability, race, culture or beliefs
- Every child (and parent) has the right to information and procedures for any complaint or queries he or she may have regarding intimate care.

Definition of Intimate Care

Intimate care is any care which involves washing, touching or carrying out an invasive procedure (such as cleaning up after a child has soiled themselves or vomited). Most children can carry out personal care for themselves, but some are unable to due to physical disability, special educational needs associated with learning difficulties, medical needs or needs arising from the child's stage of development.

Care may involve help with drinking, eating, dressing and toileting. It may also require the administration of an insulin injection, Epi- pen or any other medication.

In most cases intimate care will involve procedures to do with personal hygiene and the cleaning of equipment associated with the process.

Any additional training will be provided by the school.

Supporting Personal hygiene

Learning about personal hygiene is included in the new statutory area of Health Education. Children and young people should learn about this at both primary and secondary levels. In the wake of the Covid pandemic, children and adults in schools have a heightened awareness of personal issues and this might provide a positive springboard for improved understanding of and approaches to building long lasting, preventative behaviours relating to personal hygiene. Students who identify they need to shower after sports or due to other personal reasons will be allowed to use the sports facility showers. Staff must ensure the facilities are clear of other students before allowing entry. One student is to be allowed access to the changing room facility at a time. A staff member must remain in the vicinity outside of the room whilst the room is in use. Only children identified as being 'independently able' to carry out self-care skills will be allowed to. Those who require support must have a care plan in place.

Our Approach to Best Practice

The management of all children with intimate care needs will be carefully planned. Any 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 fully aware of best practice. Suitable equipment and facilities are to be

provided to assist children who need special arrangements. Personal care will take place in the bathroom opposite the schools medical room which is stored with appropriate PPE. If during Residential time in the bathroom of the student bedroom.

Staff will be supported to adapt their practice in relation to the needs of individual children taking into account developmental changes.

Staff will encourage each child to do as much for themselves as possible. This may mean, for example, giving the child responsibility for washing themselves. Individual care plans will be drawn up for children as appropriate to suit the circumstances of the child. Each child's right to privacy will be respected. Careful consideration will be given to each child's situation. Where possible one child will be catered for by one adult, unless there is a sound reason for having more adults present. If this is the case, the reasons will be clearly documented.

Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the child's intimate care plan. The needs and wishes of children and parents will be taken into account wherever possible within the constraints of staffing and equal opportunities legislation.

Writing an Intimate Care Plan

Where a routine procedure is required an intimate care plan should be agreed in discussion with the child, school staff, parents and relevant health personnel. The plan should be signed by all who contribute and reviewed on an agreed basis. In developing the plan the following should be considered;

- A) Whole School implications
 - The importance of working towards independence
 - Arrangements for home-school transport, sports day, examinations, school trips, swimming, etc.
 - Ensure that there is enough stock of equipment available
 - Who will substitute in the absence of the appointed person.
- B) Classroom management
 - The child's seating arrangements in class
 - A system for the child to leave class without disruption to the lesson
 - Awareness of a child's discomfort which may affect learning and to have the opportunity to catch up.
 - Implications for PE e.g. discreet clothing, additional time for changing
 - Strategies for dealing with pressure from peers .e.g. teasing/bullying particularly if the child has an odor

All plans will be clearly recorded to ensure clarity of expectation, roles and responsibilities. They will reflect all methods of communication including emergency procedures between home, school and the medical service. A procedure will also be included to explain how concerns arising from the intimate care process will be dealt with.

Toilet Training

Cloughwood Academy recognises that some of our pupils have yet to meet all strands of the Early Years Foundation Stage. This includes self-care. As developmental milestones have not yet been achieved by some of our pupils, there will be a wide variation in the time at which they master the skills involved in being fully toilet trained. For a variety of reasons pupils may:

- Have been fully toilet trained but regressed for a little while due to excitement, stress, trauma, medical conditions
- May be fully toilet trained at home but have accidents at school, or vice versa
- May be nearly there but need some reminders and encouragement
- Not toilet trained, but respond well to a structured toilet training process

- Be fully toilet trained but has a serious disability or learning difficulty
- May have development delays but with additional support will master these skills
- Due to their special, needs might require help with some or all aspects of personal care.

Links with other agencies

Positive links with other agencies will enable school-based plans to take account of the knowledge, skills and expertise of other professionals and will ensure the child's well-being and development remains paramount.

Pupil Voice

Cloughwood Academy will agree the appropriate terminology for private parts of the body and functions to be used by staff. It may be possible to determine a child's wishes by observation of reactions to the intimate care. Where there is any doubt that a child is able to make an informed choice on these issues, the child's parents/carers are usually in the best position to act as advocates. It is the responsibility of all staff caring for a child to ensure they are aware of the child's method and level of communication. Communication methods may include words, signs, symbols, body movements and eye pointing. To ensure effective communication with the child, staff will ascertain the agreed method of communication and identify this in the agreed Intimate Care Plan.

Environmental

Where children have a long-term incontinence or a disability requiring regular intimate care, the school will require specially adapted facilities. Specialist advice from medical or therapy staff will be sought when considering space, heating, ventilation and lighting.

Additional considerations we will have in place are:

- Facilities with hot & cold running water
- Appropriate PPE
- Labelled bins for the disposal of soiled items
- Supplies of suitable cleaning materials; anti-bacterial spray, sterilising fluid, deodorisers, Anti-bacterial hand wash
- Supplies of appropriate clean clothing or any other supplies needed
- An effective system should be identified to alert staff for help in emergency

Vulnerability to abuse

Children should be encouraged to recognise and challenge inappropriate assistance and behaviour that erodes their dignity and self-worth. Staff should be encouraged to listen. It is essential that all staff are familiar with the Academies Safeguarding Policy and procedures. The following are factors that can increase a child's vulnerability;

- Children who need help with intimate care are statistically more vulnerable to exploitation and abuse
- Children with disabilities may have less control over their lives than others.
- Children receive sex and relationship education but still may be less able to recognise abuse.
- Children may experience multiple carers
- Children may not be able to distinguish between intimate care and abuse
- Children may not be able to communicate

If a child is hurt accidentally he or she should be immediately reassured and the adult should check that he or she is safe and the incident reported immediately to their line manager / Safeguarding Lead.

If a child appears sexually aroused, misunderstands or misinterprets an action/instruction, the incident should be reported immediately to the Designated Safeguarding Lead or Safeguarding team.

Intimate care can also take substantial amounts of time but should not feel like a punitive experience for the child or for their parents/carers. It is essential that every pupil is treated as an individual and that care is given as gently and as sensitively as possible. Pupils should be treated with dignity and respect and given privacy appropriate to their age and situation. The pupil should be encouraged to express choice. Staff should not undertake any aspect of intimate care that has not been agreed by the Senior Leadership, parents and pupil.

Intimate care arrangements

If a staff member has concerns about a colleague's intimate care practice they must report this following the Academy's whistleblowing policy. If you observe any unusual markings, discoloration or swelling including the genital area, report immediately following the Academy's policy and procedures.

If during the intimate care of a pupil you accidentally hurt them, misunderstand or misinterpret something, reassure the pupil, ensure their safety and report the incident immediately following the Academy's policy and procedures. Report and record any unusual emotional or behavioural response by the pupil. Any safeguarding concerns should be reported to the DSL and recorded on CPOMS. The normal process of changing or supporting toileting should not raise child protection concerns, and there are no regulations that indicate that a second member of staff must be available to supervise changing to ensure that abuse does not take place. However, in some instances it may be appropriate for two members of staff to change/support a child, i.e. if a child gets very distressed or has made an allegation previously.

Appendix 1

Record of Intimate Care Intervention

Child's Name..... DOB.....
Name of Support Staff Involved.....
Date.....
Time.....
Procedure.....
Staff Signature.....
Second signature.....

Appendix 2

PERMISSION FOR SCHOOLS TO PROVIDE INTIMATE CARE

I understand that;

- I give permission to the school to provide appropriate intimate care support to my child e.g. changing soiled clothing, washing and toileting
- I will advise the Academy of any medical complaint my child may have which affects issues of intimate care

Name.....

Signature.....

Relationship to child.....

Date.....

Child's Surname.....

Child's Forename.....

Male/Female.....

Date of birth.....

Parent/carers name.....

Address.....

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