



Intimate Care Policy

Argyle House School This Policy also includes the EYFS Stage and Before and After School Provision

Statement of Intent

The proprietor and staff of Argyle House School fully recognise the contribution it makes to safeguarding and promoting the welfare of children. We recognise that all staff, including volunteers, have a full and active part to play in protecting our pupils from harm.

All staff believe that our school should provide a caring, positive, safe and stimulating environment, which promotes the social, physical and moral development of the individual child. The school recognises the importance of working within the framework for Every Child Matters: Change for Children and the five outcomes outlined within it:

> To be Healthy To Stav Safe To enjoy and achieve To make a positive contribution To achieve economic well-being

The Staff at Argyle House School realise that the issue of intimate care is a difficult one and will require staff to be respectful of children's needs.

Definitions

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.

Procedures

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

Staff deliver a full personal safety curriculum to all children, as part of our Personal, Social, Health and Emotional Education curriculum (PSHE), as appropriate to their stage of development and understanding. This work is shared with parents who are encouraged to reinforce the personal safety messages at home.

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Argyle House 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. Argyle House 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 way that causes distress or pain.

Our approach to best practice

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 Child Protection and Health and Safety training in moving and handling) and are fully aware of best practice. Apparatus will be provided to assist with children who need special arrangements following an assessment from a physiotherapist or occupational therapist as required.

Where necessary, 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 any staff who are involved in the intimate care of children and young people will not be involved with the delivery of sex education to them.

All staff will carefully and sensitively discuss each child's needs and preferences with them, in line with their preferred means of communication (for example verbal and symbolic). The child will be made 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. 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 their circumstances and requirements. These plans will include a full risk assessment to address issues such as moving and handling, and the personal safety of the child and the carer.

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, one child will be cared for by one adult unless there is a sound reason for having two adults present. If this is the case, the reasons should be clearly documented.

Wherever possible the child will not be cared for by the same adult on a regular basis; there will be a rota of carers known to the child who will take turns in providing intimate care. This will ensure, as far as possible, that over-familiar relationships are not developed.

However, the staff will make every effort to ensure that the care is not carried out by a succession of completely different carers.









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Parents and carers will be involved with their child's intimate care arrangements on a regular basis; a clear account of the agreed arrangements will be recorded on the child's care plan.

The needs and wishes of children and parents will be carefully considered alongside any possible constraints for example staffing and equal opportunities legislation.

Each child or young person will have an assigned senior member of staff 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 the care that they receive.

The Protection of Children

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

Safeguarding and multi-agency procedures will be accessible to staff and strictly adhered to. If a member of staff has any concerns regarding physical changes in a child's presentation, for example marks, bruises and soreness, he or she will immediately report them to the Designated Person for Safeguarding. A clear record of the concern will be completed and referred to Social Care and/or the Police, in line with our Local Safeguarding Children Board procedures. These concerns will be discussed with parents and carers prior to a referral, 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 and 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 issues 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 of abuse, procedures outlined in the Safeguarding Policy will be followed.





