



# REIGATE GRAMMAR SCHOOL VIETNAM

---

## Intimate and Personal Care Policy

---

<b>Policy Author:</b>	Senior Leadership Team
<b>Date Reviewed By Author:</b>	October 2022
<b>Next Review Due:</b>	October 2023
<b>Date Approved By Governing Body:</b>	December 2022
<b>Next Review by Governing Body Due:</b>	December 2023

---

## Philosophy

At RGS Vietnam, we believe that every child has the right to:

- Be accepted for who they are, without regard to age, gender, ability or race
- Be kept safe
- Maintain personal privacy
- Be valued as an individual
- Be involved in their own intimate care
- Be treated with dignity and respect
- Express their views on their own intimate care and to have their views taken into account.

The Intimate and Personal Care Policy and Guidelines have been developed to safeguard children and staff. They apply to everyone involved in the intimate care of children and young people up to the age of 18. Disabled children can be especially vulnerable. Staff involved with their intimate care need to be sensitive to their individual needs.

These guidelines should be read in conjunction with other policies held by the school, such as:

- Safeguarding & Child Protection Policy
- Health & Safety Policy
- Staff Recruitment Policy

## Policy Statement

At RGS Vietnam, we are committed to ensuring that all staff responsible for the intimate care of children undertake their duties in a professional manner at all times. We recognise that there is a need to treat children with respect when engaged in any form of intimate care. The child's welfare and dignity are paramount at all times.

## Aims of Policy

- To ensure that the School works in partnership with parents, guardians and carers to ensure that they fully understand the school's policies and procedures when dealing with intimate care.
- To ensure that the provision of intimate and personal care fully satisfies the school's safeguarding and child protection policy.
- To ensure that the intimate care of children is done in a sympathetic manner and children are treated with respect.
- To consider every child's needs individually, taking full account of their age, special needs, level of language, disability and gender ensuring everything will be done to avoid embarrassment.

## Definitions

Intimate care is defined as any involvement that requires touching or the carrying out of invasive procedures to support the personal care needs of the child. Where possible, children will carry out these tasks independently; however, for a small number of pupils, especially those with a physical/learning disability or those with medical needs, intimate care support may be required on either a regular or intermittent basis.

### **Intimate care may involve:**

- Washing
- Feeding
- Dressing
- Toileting
- Other invasive procedures

### **Responsibilities**

The delivery of intimate care should be undertaken by trained and qualified staff and governed by their professional code of conduct. Staff must support the child in the achievement of the highest level of autonomy that is possible given their age and ability. Where necessary, personalised care plans will be drawn up for individual children.

#### **Senior leaders**

Senior leaders must ensure that all staff undertaking the intimate care of children are familiar with and understand the Intimate and Personal Care policy and guidelines.

Where a staff member has reported concerns about a colleague's intimate care practice, the Designated Safeguarding Lead should record and fully investigate these concerns.

#### **All staff**

All members of staff should be familiar with the procedures outlined in this policy and understand their responsibilities in implementing these.

### **Equipment and facilities**

All staff involved with intimate care should use the following facilities as appropriate:

- Adjustable changing beds
- Protective clothing and disposable gloves
- Labelled bins, waste bins for incineration
- Supplies of suitable cleaning materials with COSHH certificates
- Specific aids, such as steps for accessing sinks, portable sinks, rails and standers

### **Diapering and toileting procedures**

**Guidance for changing diapers and supporting with toilet training** is informed by the example of the US state of Illinois Department for Children and Family Services. (Appendix 1)

#### **Toileting**

For a child requiring toileting, the following guidance should be followed:

- Escort child to bathroom
- Prepare toilet by wiping with a sanitised / disinfectant cloth or placing protective paper
- Put on disposable gloves and an apron
- Talk to student about what you are doing
- Assist student with clothes
- Transfer and or assist student to toilet

- If required stabilise student on toilet seat
- Clear student when finished: wipe child's bottom from front to back
- Dispose of soiled gloves and put on clean pair of gloves
- Transfer student from toilet
- Staff will encourage each child to do as much as they can for themselves e.g., giving the child responsibility for washing themselves
- The needs and wishes of children and parents will be considered wherever possible within the constraints of staffing and equal opportunities legislation
- The school's Safeguarding & Child Protection procedures will be adhered to at all times

## Recording

Staff will record diaper changes/visits to the bathroom within an intimate care log. (See appendix 2)

## Safeguarding & Child Protection

There is no legal requirement for two adults to be present and such a requirement might be impractical. The normal process of changing a child who has had an accident should not raise safeguarding or child protection concerns, and there are no regulations that indicate that a second member of staff must be available to supervise the changing process to ensure abuse does not take place.

If there is a known risk of false allegations by a child, then a single practitioner should not undertake changing. Personal and intimate care of children with special needs and/or disabilities will be undertaken with sensitivity, the need to protect staff and in accordance with the needs and wishes of the child and parent/carer wherever practicable.

## Appendix I:

### **Diapering and Toileting Procedures**

*Each area serving children wearing diapers or disposable pull-ups shall have a designated diapering area that includes at least the following:*

- An accessible hand-washing sink
- A changing surface that has an impervious, non-absorbent surface.
- Covered receptacles conveniently located close to the changing surfaces for the disposal of soiled diapers. These receptacles shall be washable, plastic lined and tightly covered. There shall be separate containers for disposable diapers, cloth diapers (if used) and soiled clothes and linens.
- A supply of disposable latex gloves.
- Clearly posted procedures for diaper changing, consistent with the following:

*Have the following supplies ready before bringing the child to the diapering area*

- Disposable wipes or fresh, wet paper towels;
- Diapers;
- Skin preparations prescribed by the child's doctor
- Disinfecting solution and paper towels for cleaning up.

*Steps:*

- Lay the child on the changing surface, taking care to minimise contact with the child if his/her outer clothes are soiled.
- Put on protective gloves.
- Remove diaper and any soiled clothes.
- Clean the child's bottom from front to back with a fresh disposable wipe or a damp paper towel. Aerosol or roll-on products shall not be used.
- Dispose of disposable diapers, paper towels and diaper wipes in covered receptacles. Put soiled clothes and cloth diapers into a plastic bag to be sent home with the parent.
- Remove disposable gloves. Wash hands or wipe hands with a pre-moistened towelette and use another towelette to clean the child's hands.
- Place a clean diaper on the child. Make sure the child's clothing is clean and dry. If not, change the child's clothing.
- Wash the child's hands
- Return the child to a supervised area.
- Clean visible soil from the changing table with paper towels or disposable wipes.
- Clean and disinfect the diapering area.
- Wash adult hands

### **Additional information**

- The diapering area shall be separate from any food preparation areas, and shall never be used for the temporary placement or serving of food.
- Changing surfaces shall be cleaned and sanitised between each diaper change.
- Diaper receptacles shall be cleaned and sanitised daily.
- Diapers shall be able to contain urine and stool and minimise faecal contamination of the child, caregivers, environmental surfaces and objects of the child care centre.
- If cloth diapers are used, soiled cloth diapers and/or soiled training pants shall never be rinsed. The faecal content may be placed in the toilet, but the diaper shall not be rinsed.

- Toilet-training equipment shall be provided for children being toilet-trained.
  - Child-sized toilets or safe and cleanable step aids and modified toilet seats shall be available.
  - If used, the contents of potty chairs shall be dumped in the toilet, and the potty chair shall be cleaned and sanitised between each use.
  - Toilets and lavatories shall be readily accessible to the children. If toilets are not located near the children's activity areas, an adult shall accompany children 4 years of age or younger.
  - If toilets and lavatories are not child-sized, non-absorbent safe steps shall be provided.
- Hot and cold running water shall be provided
- Mild liquid soap and single-use towels or automatic dryers shall be provided. Towels may be disposable. Automatic dryers shall not be used for infants and toddlers.
- Toilet and hand-washing areas for school-age children shall be enclosed to provide for privacy.
- Toilets and lavatories shall be readily accessible for staff use.
- Children and staff shall wash hands thoroughly after using the toilet or assisting in toileting, and after each diaper change.

Appendix 2:

**Intimate Care Log**

Name Of Child	Date and signature of adult undertaking care	Any incident needing adult assistance should be describes here. Eg soiling, wetting, applying sun cream etc.