

# Intimate Care Policy & Procedures Policy and SOP

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[MONTH YYYY]

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# Policy

## 1 Purpose and Objectives

This policy is designed to safeguard children, young people and adults at risk of harm and all The Children's Trust staff when supporting with the intimate care needs of children and young people (CYP). All staff at The Children's Trust have a duty of care and need to exercise caution in any context which involves children, young people and performing intimate cares.

Our aim is to provide intimate care for all children and young people irrespective of their race, gender, sexuality and cultural beliefs. We strive to be an inclusive, equitable and diverse place for children, young people and families, and will work with the family to understand the child's specific needs to ensure that they feel included and supported.

We welcome diversity in our organisation, and actively encourage our people to take an inclusive approach in everything they do. Staff have a responsibility to be aware of and understand the cultural or religious sensitivities related to aspects of intimate care. All children and young people should be treated as individuals, appropriate to their age and stage of development

For the purpose of this policy, intimate care can include: feeding, oral care, washing, dressing/undressing, toileting, menstrual care, treatments such as enemas, pessaries or suppositories, enteral feeds, catheter and stoma care, supervision of a child involved in intimate self-care, applying prescribed creams and ointments, administering, brushing hair and performing grooming activities.

The objectives of the policy and this procedure are to:

- Establish and assign clear accountability for providing intimate care for the children and young people at TCT
- Ensure that all nursing, care and therapy staff are aware of their individual role and responsibilities when providing intimate care for the CYP
- Comply with The Children's Trust Safeguarding Children, Young People & Adults at Risk Policy & Procedures
- Ensuring all children and young people requiring intimate care are treated with dignity and respect following equality, diversity and inclusion principles.
- Reassure parents that their children are cared for and protected
- Ensure that staff accurately evidence intimate care through documentation
- Comply with The Children's Trust Infection, Prevention and Control policy.

Relevant laws and regulations include but are not limited to:

- Children Act 1989, 2004
- Equality Act 2010
- The Children's Home Regulations 2015
- Mental Capacity Act 2005

## 2 Scope

This policy applies to:

- All The Children's Trust staff employed to care for CYP
- Volunteers recruited to support CYP will not provide intimate care but should be aware of policy relating to this.

## 3 Definitions

Unless otherwise stated, the words or expressions contained in this document shall have the following meaning:

|   |  |
|---|--|
| TCT /The Trust                            | The Children's Trust   |
| Children and Young People/ CYP /Residence | Refers to Children and Young people who live at the Children's Trust for School and for rehabilitation and those that attend The Children's Trust School |
| KCSIE                                     | Keeping Children Safe in Education   |
| SOP                                       | Standard Operating Procedure   |
| Staff                                     | Refers to those employed by The Children's Trust   |
| Care staff                                | Refers to – Specialist Teaching Assistance (STA), Children's Support Assistants (CSA), Multi-disciplinary Technicians (MD Techs)                         |
| Volunteers                                | Those working in the trust on a voluntary basis  |

## 4 Policy Statement

This section sets out management's intent and the guiding principles in relation to providing intimate care to all CYP in the trust.

- 4.1 TCT adhering to the safer Recruitment Policy ensuring they are employing safely
- 4.2 All staff must adhere to the principles of equality, diversity and inclusion when caring for CYP
- 4.3 Before admission a history of intimate care need and support will be taken from the CYP where appropriate and their family or carers
- 4.4 An initial plan for intimate care should be written this needs to be coordinated multidisciplinary approach, within the first 24 hours of admission
- 4.5 All staff under taking care are trained before undertaking intimate care, including dignity, respect, infection prevention, control including PPE. If this is not possible the staff member must only assist with personal care under the supervision of another trained member of staff

- 4.6 Care staff are signed off with Principles of Care competency before assisting and providing personal care. If this is not possible they should not provide intimate care unsupervised
- 4.7 Intimate care arrangements must be recorded in the child's care plan and signed by the parents / person with parental responsibility / carers and child (if appropriate)
- 4.8 All staff caring for a CYP must familiarise themselves with the individualised child/young person's bespoke intimate care plan and seek consent before commencing intimate care
- 4.9 All care plans must be updated within the last year or as needs change, and all changes need to be amended in the care plan
- 4.9 Care plans must be readily available for all staff to enable intimate care to be provided as agreed by the child and family, while adhering to the principles of GDPR
- 4.10 All staff and volunteers must adhere to the principles in the Whistleblowing policy if they witness care not being provided in line with the care plan or if there are concerns that respect and dignity are not prioritised
- 4.11 Nursing, care staff and therapy staff must ensure they remain up to date with all training.

## **5 Stakeholder Consultation**

Appendix 1 details the stakeholders who were consulted in the development of this policy and

## **6 Related Policies and Procedures**

The following policies and procedures stated below support the effective application of this policy and SOP:

- The Children's Trust Safeguarding Children, Young People & Adults at Risk Policy & Procedures
- Working Together to Safeguard Children 2018
- Keeping Children Safe in Education 2021
- Infection, Protection and Control Policy
- Equity, diversity and Inclusion Policy
- Whistleblowing Policy
- Consent Policy
- Record Keeping Policy
- Nutrition and Hydration Needs Policy
- Moving and handling policy
- Lone worker policy
- Health and safety policy
- Confidentiality policy
- Tissue viability policy
- Bruising policy
- Children's equality and human rights policy
- Communicating with children and young people policy
- Data protection policy
- Food safety policy
- Medicine management policy
- Naso-gastric tube management policy

- Oral health policy
- Principles of delegation for nursing, care, and therapy staff policy
- Spiritual care policy

## **7 External References and Guidance**

The following external resources and guidance were consulted in drafting this policy and SOP:

- Working Together to Safeguard Children 2018
- Keeping Children Safe in Education (updated September 2021)

# Standard Operating Procedures (SOP)

## 1 Roles and responsibilities

### Peoples Team

The Children's Trust Peoples Team is responsible for:

- Adhering to the Safe Recruitment Policy for employing staff
- Pre-employment checks
- Ensuring interview panel staff hold up to date safer recruitment training

### Clinical Governance Committee

The Clinical Governance Committee is responsible for:

- Gaining assurance that the policy and procedure are fit for purpose
- Ensuring the policy and procedure are being implemented

### Chief Executive

The Chief Executive is responsible for:

- Having overall responsibility, as far as is reasonably practicable, for maintaining the health, safety and welfare of the children and young people.

### Head of Nursing and Care

The Head of Nursing and Care is responsible for:

- Overarching responsibility for care team.

### Education Team

Education Team is responsible for:

- Training for care staff and coordinating annual updates
- Staff induction training
- Staff training resources
- Contemporaneous record keeping of training completed which is available to house managers

### House Managers and Lead School Nurse

House Managers and Lead School Nurse are responsible for:

- Organising Training for nursing and care staff and coordinating annual updates
- Ensuring safe staffing
- Ensuring care plans are up-to-date
- Ensuring volunteers are aware they are not to perform intimate care

### **Nursing, Care and Therapy Staff**

Nursing, Care and Therapy Staff are responsible for:

- Completing their training – depending on the professionalism this may include some or all of the following principles of care, dysphagia training, safeguarding 1-3
- Following the guidance set out in care plan
- Using correct equipment outlined in care plan and reporting any issues
- Obtaining consent and maintaining dignity
- Raising safeguarding concerns
- Understanding and working within the limitations of their training

## **2 [Process/ Procedure]**

Prior to admission:

Assessment of care required including intimate care. Written documentation of these needs is collated before admission and where possible equipment is sourced.

Admission:

- Discussions with carer or parent regarding intimate personal requirements including personal choice, parental involvement, maintaining dignity and respecting diversity
- Staff have a responsibility to be aware of and seek to understand the cultural or religious sensitivities related to aspects of intimate care. Attempts will be made to support this, where possible.
- Parents/carer are informed they will be asked to sign care plan
- Personal care assessment including shower, bath equipment and setup organised to be undertaken as soon as possible. The correct equipment and positioning will be documented in the moving and handling passport.
- Ensure all equipment is available to enable intimate care to be performed

Training:

- All staff complete the induction training which includes a principles of care session that covers intimate care, dignity, privacy, and consent themes.
- Care support staff complete their care certificate within the first 3 months of employment. This has standards that explore duty of care, infection control, privacy and dignity, communication and working in a person-centred way.
- All staff have a probationary meeting at 6 months. By this stage care staff should have completed their competency-based workbook, this includes the principles of care competency covering intimate care.
- All nursing, care and therapy staff must attend level 3 safeguarding Training

Equipment:

- Correct levels of stock, equipment, including toiletries, hoists and physical environment



## Transparency

- Access to IRAR
- Documentation of all care provided
- Clear reporting concerns procedure.

## Document Change Control

| Version | Status   | Description                   | Reviewed by                        | Reviewed/<br>Issued Date |
|---------|----------|-------------------------------|------------------------------------|--------------------------|
| 0.1     | Draft    | Reviewed by Nursing care team | Kayleigh<br>Goddard<br>Maria Lakin | 08.03.2022               |
| 0.1     | Draft V2 | Reviewed by safeguarding team | Michele Okuda<br>Lisa Hammerton    | 04.04.2022               |
| 0.13    | Draft V3 | Reviewed by Claire            | Claire Shiels                      | 05.04.2022               |
| 0.14    | Draft 4  | Review by CET team            | Helen Wims                         | 07.04.2022               |
| 0.15    | Draft    | Reviewed by EDI               | Georgia Pullman                    | 13.06.2022               |
| 1.0     | Final    |                               |                                    |                          |

## Appendix 1 – Stakeholder Engagement Checklist

Review and complete the following checklist to indicate which stakeholders were consulted in the development of this policy.

| #  | Question  | Yes/ No | Stakeholder(s) to be consulted                                   |
|----|---|---------|--|
| 1  | Is there a statutory requirement to have in place this particular policy/ does the policy need to comply with detailed legislation?   | Yes     | Audit, Risk and Governance team<br>Human Resources – safe policy |
| 2  | Is implementation of the policy (or any element of it) dependent on the use of new or existing information technology?  | No      | Head of IT   |
| 3  | Does implementation of the policy (or any element of it) place any demands on/ or affect the activities of the Estates and Facilities teams (e.g. does it impact the provision or maintenance of premises, equipment, vehicles or other TCT assets)?                                    | No      | Head of Estates  |
| 4  | Does implementation of the policy or any element of it involve/ impact the processing of personal data?   | Yes     | Data Protection Officer  |
| 5  | Does implementation of the policy require significant unbudgeted operational or capital expenditure?  | no      | Finance Director   |
| 6  | Does implementation of the policy (or any element of it) directly or indirectly impact on the delivery of services / activities in other areas of the organisation? E.g. a policy written by a clinical lead in CF&S might impact on the delivery of care for CYP attending the School. | Yes     | Relevant, impacted OLT members                                   |
| 7  | Is there a need to consider Health and Safety or potential environmental impacts in developing and implementing the policy?   | No      | Health and Safety Manager  |
| 8  | Have you consulted with a representative of those who will be directly impacted by the policy?  | Yes     | House Managers   |
| 9  | Is there a need to consider Equity, Diversity and Inclusion in developing and implementing the policy?  | Yes     | EDI Lead   |
| 10 | Is there a need to consider sustainability and potential environmental impacts in developing and implementing the policy?   | No      | Lead for Responsible Organisation                                |
| 11 | Please detail any other stakeholder groups consulted, if applicable.  |         |  |

## Principles of care



Principles of care brings together a number of key factors that are essential to delivering high quality, compassionate and consistently effective care.

It covers the fundamental considerations that have to be adhered to whenever we are administering basic nursing care to the children and young people at the trust. It particularly focuses on professional behaviours and the delivery of things like personal care, bringing in key themes such as consent, dignity, equality and diversity.

We must ensure that all care is delivered compassionately with a focus on the needs of the individual child or young person. All children should receive the same high quality care independent of religion, gender or nationality. We must ensure that we deliver family/child centred care at all times.

| Principles of care   |            |
|--|------------|
| To be deemed competent in the principles of care you will need to be able to....   | Achieved ? |
| Describe the key principles of good care and define the key terms such as dignity, equality, diversity and age appropriate care. Define what is meant by the term professional behaviour and explain the importance of always seeking to gain consent.                           |            |
| Perform consistent high quality care that demonstrates the key principles at all times. Demonstrate how you try to gain consent where possible and how you respect dignity, equality and diversity. Consistently demonstrate child/family centred care.                          |            |
| Evaluate and reflect upon the care that you have been involved in and describe how you consistently endeavoured to meet the key principles of good care. Reflect upon concepts such as communication and consent and what this means for the children/young people in your care. |            |

.....has demonstrated the appropriate knowledge, skills and attitudes to be deemed competent in the principles of care.

Assessed by .....Signed.....

Designation.....

Date .....

**Appendix 3 – Principles of Care Competency Assessment School**

## Principles of Care

Principles of care brings together a number of key factors that are essential to delivering high quality, compassionate and consistently effective care.

It covers the fundamental considerations that have to be adhered to whenever we are administering basic nursing care to the children and young people at The Children’s Trust (TCT). It particularly focuses on professional behaviours and the delivery of things like personal care, bringing in key themes such as consent, dignity, equality and diversity.

We must ensure that all care is delivered compassionately with a focus on the needs of the individual child or young person. All children should receive the same high quality care independent of religion, gender, race or nationality. We must ensure that we deliver family /child centred care at all times.

| Principles of care  |                             |
|---|-----------------------------|
| I have read Keeping Children Safe In Education (Part 1 is mandatory)  | Date: _____ Sign: _____     |
| I have read Working together to safeguard Children  | Date: _____ Sign: _____     |
| I have read The Children’s Trust’s Safeguarding Policy  | Date: _____ Sign: _____     |
| Describe the key principle of good care and define the key terms such as dignity, equality, diversity and age appropriate care. Define what is meant by the term professional behaviour and explain the importance of always seeking to gain consent                    | Sign and date when achieved |
| Perform consistent high quality care that demonstrates the key principles at all times. Demonstrate how you try to gain consent where possible and how you show respect dignity, equality and diversity. Consistently demonstrate child centred care                    | Sign and date when achieved |
| Evaluate and reflect upon the care that you have been involved in and describe how you consistently try to meet the key principles of good care. Reflect upon concepts such as communication and consent and what this means for the children/young people in your care | Sign and date when achieved |
| Discuss how to raise a concern if care was not up to the required standard  | Sign and date when achieved |

I believe that the Principles of Care have been demonstrated and discussed and I feel confident with the evidence I have gathered to sign off this person as proficient.

Assessed by \_\_\_\_\_ Signed \_\_\_\_\_

Designation \_\_\_\_\_ Date \_\_\_\_\_