

# PERSONAL & INTIMATE CARE POLICY & PROCEDURE DSDT

	Date	Name/signature
Last updated	5/6/20 23	MR
Reviewed by Managing Director	9/6/23	Sen Smallwood
Reviewed by Trustees		
Date for next review		

### 1/ INTRODUCTION

The purpose of this policy and procedure is to set out a framework within which staff who provide personal & intimate care to children and young people with Down syndrome, whilst they are in the care of DSDT can offer a service and an approach which acknowledges the responsibilities and protects the rights of everyone involved.

They apply to everyone involved in the personal & intimate care of children and young people whilst they are in the care of the DSDT.

The Personal & Intimate Care Policy and Procedure should be read together with other DSDT policies, including

- Safeguarding Policy
- Health & Safety Policy
- Code of Conduct
- Hosting Sessions Policy (currently being updated)
- Lone Working Policy (currently being updated)
- Complaints Policy.
- GDPR Policy
- Disciplinary/Grievance Policy.

Staff (and volunteers) who assist young people with personal & intimate care whilst they are the responsibility of the DSDT, will have the usual range of safer

recruitment checks, including enhanced DBS checks.

#### 2/ LEGISLATION, STATUTORY GUIDANCE AND PROCEDURES

Our personal & intimate care policy and procedure is supported by the legislation included in our Safeguarding Policy, so should be read in conjunction with that. Further legislation that applies is:

- Human Rights Act 1998
- Equality Act 2010
- The Care Act 2014

#### **3/ DEFINITION**

Personal care = If a young person needs support to change their clothing, or to wipe their face for example, this will be considered as personal care.

Intimate care = assisting a young person to use the toilet, including assisting with the changing of pull up pants and/or nappies. This may include direct or indirect contact with an intimate area of a young person, such as assisting with wiping after a bladder or bowel movement. This policy and related procedures have been developed for the best practice of all physical contact between DSDT staff and young people who are in their care. The following points are to be strictly followed:

### All personal & intimate care will:

- be agreed upon in the first instance with the parent/carer of the young person and the young person themselves and this will be written down in the young person's quick care guides.
- be strictly aimed at meeting the needs of young people.
- respect the dignity and privacy of each young person at all times.
- be consistent with the professional integrity of staff members.

#### 4/ AIMS

The aims of this document and associated procedure are to:

- safeguard the dignity, rights and wellbeing of children and young people.
- assure parents that staff have training about personal & intimate care and that their child/young person's individual needs and concerns are of the utmost priority.
- provide guidance and reassurance to staff.

#### 5/ WORKING IN PARTNERSHIP WITH PARENTS/CARERS.

- Most of the information required to make the process of personal & intimate care as comfortable and as least intrusive as possible will be from direct communication from the young people themselves and their parents/carers. This includes knowledge and understanding of any religious/cultural sensitivities.
- Details of personalised support potentially required will be included in the quick care guide for each individual.
- Written consent will be obtained by each individual and their parent/carer, prior to support being provided.
- Parents/carers will be informed of details of any personal & intimate care provided when they collect their young person from the session. The member of staff will also record the same information on the back of the attendance register which will to be retained confidentially, and kept for future reference if needed.

#### 6/ STAFF CONSENT & TRAINING

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- DSDT staff must give written consent in order to provide support to young people with their personal & intimate care. This is a personal choice for each individual member of staff as to whether they are willing to take on this role. It is not compulsory, however there must be at least one male and one female member of staff who have given their consent to providing this support, available activities where at parents/carers are not present so that personal & intimate care can take place if necessary.
- DSDT staff must understand and be clear on their role and responsibility in relation to providing support with personal & intimate care. If they are unsure they must speak to a senior member of staff or seek further training and support.
- DSDT staff must read and understand other relevant DSDT policies and procedures, especially the Safeguarding Policy. DSDT staff must have an enhanced DBS check and the relevant training.

#### 7/ BEST PRACTICE

- The young person will be supported to achieve the highest level of autonomy possible, given their abilities. DSDT staff will encourage each young person to do as much for themself as they can. Individual details of potential support needed will be detailed on each young person's quick care guide.
- It is the responsibility of all DSDT staff supporting a young person to ensure they are aware of the child's method and level of communication. For example - communication methods may include words, signs, symbols, and body movements.

- It is the responsibility of DSDT staff to be familiar with the guick care guide plan for the young person they are supporting. The staff member will encourage the young person's independence and only intervene where necessary. Staff will wear protective gloves when assisting with intimate care and take guidance from the young Personal & (see person. Intimate Care Procedure for further information following)
- DSDT Staff will always ensure the young person's dignity and privacy.
- After assisting with toileting and wiping, soiled wipes and pull ups are to be disposed of in the sanitary bin provided
- When a young person requires intimate care it would be preferable for 2 members of staff to be available - particularly when going to the toilet - one staff member can wait outside the toilet whilst the other member of staff assists. This is so that there is extra help if required and so that there is a witness for the care being given However, this won't always be possible due to staff numbers and so sometimes one member of staff only will undertake the intimate care. It is also not always necessary to have two members of staff present and depending on the extent of care that a young person requires, one member of staff can be all that is required. Care should always be taken regarding the privacy and dignity of the young person so that they feel comfortable with the type of care provided. Staff should ensure that the relevant permissions have heen provided, and the process has been risk assessed. It should be remembered that whilst having 2 staff members present may be seen as providing protection against a possible allegation

against a member of staff; it does further erode the privacy of the child/young person.

#### 8/ VULNERABILITY TO ABUSE

- Young people should be encouraged to recognise and challenge inappropriate assistance and behaviour that makes them feel uncomfortable. DSDT staff are encouraged to listen to the young person and change the way they are providing support immediately, with the young person's needs, dignity and privacy at the centre.
- It is essential that all staff are familiar with the Safeguarding Policy and Procedures and that they know how to recognise possible signs of abuse and the proper procedure for reporting this. If during supporting a young person with their intimate care, a staff member observes something which raises child protection concerns, the young person seems to misinterpret what is said or done, or the young person has a very emotional reaction without apparent cause, the incident must be reported straight away to SENAY SMALLWOOD DSDT DESIGNATED SAFEGUARDING LEAD ON 01323 893323.

Email: sensmallwood.dsdt@gmail.com

### 9/ ALLEGATIONS OF ABUSE

 DSDT staff working in personal & intimate care situations with young people can sometimes feel particularly vulnerable due to potential allegations. The presence of and adherence to the Personal & Intimate Care Policy and Procedure can help to reassure both staff involved and the parents/carers of

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vulnerable young people that all aspects of this type of care have been taken into careful consideration. Action should be taken immediately should there be a discrepancy of reports between a young person and the member of staff, after assistance with intimate care has been provided.

If any parent/carer or child/young person being supported by DSDT has any concerns about the conduct of any member of the organisation, this should be raised in the first instance with:

Senay Smallwood (designated vulnerable persons' protection contact)

SENAY SMALLWOOD DSDT
DESIGNATED
SAFEGUARDING LEAD ON
01323 893323

sensmallwood.dsdt@gmail.com

DSDT registered charity and correspondence address: 13 Saltwood Road, Seaford, East Sussex, BN25 3SP

#### Website:

www.downsyndromedevelopment.org.uk

Email: <u>hello@downsyndromedevelopment.org.uk</u>

Name of Deputy Safeguarding Lead:

Marianne Robinson, Operations/Office Manager DSDT Tel: 01323 890 654 <u>marianne.dsdt@gmail.com</u>

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Second office: Unit Number 1b, The Sussex Innovation Centre, Falmer, Brighton, East Sussex, BN1 9SB PLEASE SEE THE SAFEGUARDING POLICY FOR FURTHER INFORMATION ABOUT WHO TO CONTACT AND THE PROCEDURE THAT SHOULD TAKE PLACE IF A SAFEGUARDING ISSUE ARISES.

This policy will be reviewed and updated regularly.

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#### Introduction to personal & intimate care

As a priority the personal & intimate care that needs to take place will always be checked and confirmed with the young person themselves and their parents and this will be written in the young person's quick care guide.

Personal care = If a young person needs support to change their clothing, or to wipe their face for example, this will be considered as personal care.

Intimate care = assisting a young person to use the toilet, including assisting with the changing of pull up pants and/or nappies. This may include direct or indirect contact with an intimate area of a young person, such as assisting with wiping after a bladder or bowel movement. This policy and related procedures have been developed for the best practice of all physical contact between DSDT staff and young people who are in their care. The following points are to be strictly followed:

DSDT staff will occasionally need to help support children and young people with personal & intimate care. This includes changing in and out of clothing, going to the toilet or helping with eating, cleaning and general personal care. We ask all staff when they start working for us if they are prepared to do this. It is not compulsory but they need to let senior staff know. Staff are asked to sign their staff emergency forms stating whether they are happy to undertake personal & intimate care or not.

The following procedure should take place:

- Ideally there are 2 DSDT members of staff present when an intimate care procedure needs to take place - one inside the toilet/changing area and one just outside the door. This is not always possible or necessary so staff, parents and young people need to be made aware of this.
- If the child/young person is female then a female DSDT member of staff should be the primary supporter in this instance. If the child/young person is male then a male DSDT member of staff should support them. (if the second member of staff standing outside the door is of the opposite sex then this is fine)
- Disposable gloves should be used for wiping/intimate care. Parents will need to indicate on their young person's quick care guides if they have any allergies.
- Wipes should be available in the activities backpack which is taken to all activities. Pull up pants/nappies will also be in the backpack for use if required.
- 5. Staff will be familiar with the quick care guide for the young people attending each day, which will include details on personal & intimate care if required. If they need to use the toilet or get changed, staff should ask the child or young person if they can do this independently, or do they need

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support? Many young people will usually have a bag with them with changing things inside but staff will need to check this before heading to the toilet.

- As staff will be familiar with each individual's quick care guide prior to an activity, they will be aware of their special needs, including preferred methods of communication - for example - if they like to use MAKATON, then use this whilst helping them to go to the toilet/get changed.
- If the young person can get changed/use the toilet independently, then the minimum staff intervention will be to accompany them to the toilet and wait outside in order to ensure their safety.
- 8. If the young person requires support with using the toilet/changing, please note that each individual's needs and the level of staff intervention will vary. As a DSDT member of staff we ask that you are able to judge accordingly and always with the priority of giving autonomy to the child or young person, and therefore as much independence over their intimate personal & intimate care as possible.
- 9. Some children or young people will physically choose different positions if you are asked to help them with intimate cleaning or wiping after going to the toilet. For example ask them first how they would best like to do this and keep communication going, to ensure they are in agreement and comfortable with the help you are providing.

- Use disposable gloves and toilet paper or wipes if undertaking intimate care and ensure to dispose of wipes in the sanitary bin within the toilet (never put wipes down a toilet).
- 11. Wash your hands thoroughly with soap and warm water.
- Make sure the child or young person has washed their hands well with soap and warm water after going to the toilet.
- 13. At each activity there will be a spreadsheet with the names of young people attending. If a person has heen voung provided with personal & intimate care, ensure that the staff members involved provide their initials and date on the form stating that personal & intimate care took place, add brief details on the back of the sheet. This spreadsheet will be kept in the activities folder at all times and a senior member of staff (Activities Lead) will take the folder back to the locked secure cupboard in the main office after the session. The spreadsheet will be stored securely for an appropriate amount of time in case this information needs to be referred to for any reason in the future. (Please note that it is not always possible for a second member of staff to be available to assist, so some flexibility is required. However it is preferable for 2 staff members to be present).
- 14. It is the responsibility of the staff member who assisted with personal & intimate care, to inform the parents of their involvement and to what extent, when they come to collect their child or young person. Be open

to discussing this in more detail parent/carer with the if necessary. Personal & intimate care is an important part of DSDT staff support and it is important for parents to know how many times their young person went to the toilet, if there were any problems (i.e constipation/accidents/sickness/ stomach upsets etc). Please be specific with the individual's parent/carer about the help provided, at the same time as respecting the young person's privacy.

- Talk to senior members of staff if you are unsure about any personal & intimate care procedures or if you would like more support or advice.
- Please read through our charity's personal & intimate care policy also (above).
- 17. In conjunction with the Personal & Intimate Care Policy & Procedure, it is the responsibility of DSDT staff members to read the relevant risk assessments, prior to supporting activities - as this will highlight possible risks such as young people's fingers getting trapped in doors/windows or slipping on a polished or wet floor. When taking a child or person young to the toilet/changing area, check to ensure it is safe.
- 18. Be aware of strangers or of situations that might make yourself or your young person uncomfortable - if this is the case report it to a senior member of staff immediately and move to a different location.
- 19. By being familiar with each individual's quick care guide

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before supporting them at an activity, staff will be aware of their special needs, including preferred methods of communication - for example - if they like to use MAKATON then use this whilst helping them to go to the toilet/get changed.

- 20. Please read through our safeguarding policy and personal & intimate care policy for more information and advice.
- 21. Thank you for your support.

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