



## PERSONAL AND INTIMATE CARE POLICY: Adult Services

*This policy applies to personal or intimate care for adults aged 18 years or over. Please refer to separate Intimate Care policy for children under 18 years.*

### Rationale

The Charity recognises its duty and responsibility under the Equality Act 2010 and The Human Rights Act 1998, to ensure the welfare and safeguarding needs of vulnerable adults who require support with intimate or personal care whilst accessing our services.

This policy seeks to respect the dignity of, and to provide a safe environment for vulnerable adults who require personal care assistance. Additionally, the policy seeks to ensure there is a safe working environment for staff who deliver personal care to vulnerable adults.

This document sets out a clear framework within which all vulnerable adults receive the intimate and personal care that they require to participate fully in the Charity's services and activities, whilst providing guidance for staff providing intimate and personal care.

### Definitions

There is a clear difference between personal and intimate care. Personal and intimate care both involve helping a person with aspects of their care which they may not be able to undertake for themselves, either because of their age and maturity or due to a disability or medical condition. However, these two types of care vary in nature and the terms should not be used interchangeably:

**Intimate Care:** care tasks of an intimate nature, associated with bodily functions, bodily products and personal hygiene, which demand direct or indirect contact with, or exposure of, the sexual parts of the body or intimate personal areas. Intimate tasks may include:

- Washing of body parts other than to arms, face and legs below the knee
- Toileting, wiping and care in the genital and anal areas
- Continence care, including placement, removal and changing of incontinence pads
- Menstrual hygiene

## **Personal and Intimate Care Policy**

**Personal Care:** tasks which are related to personal presentation and social functioning. Although these tasks may often involve touching another person, the nature of personal care is less intimate as tasks do not invade conventional personal, private or social space to the same extent as intimate care. These tasks do not involve direct contact with, or exposure of sexual parts of the body or intimate personal areas. Personal care tasks might include:

- Skin care/applying external medication;
- Feeding;
- Administering oral medication;
- Washing non-intimate body parts;
- Prompting to go to the toilet

### **Principles of Personal and Intimate Care**

The following are the fundamental principles of intimate and personal care upon which our policy guidelines are based:

- Maintain the dignity of the person receiving support or care
- Respect the wishes and preferences of the person receiving support or care
- Maximise safety and comfort at all times, whilst protecting against intrusion and abuse
- Respect the person's right to give or withdraw their consent for personal or intimate care tasks at any time
- Promote independence in all tasks by encouraging the person to care for themselves as much as they are able to, in line with their agreed support guidelines

### **Safeguarding Vulnerable Adults: Mandatory Requirements**

Personal or intimate care can only be provided through a package of support agreed in advance to ensure the Charity has the adequate resources in place, e.g. minimum staff ratios, appropriately trained staff. Support packages may be funded by personal budgets, local authorities or education providers.

Intimate care must be identified in advance as an assessed need and recorded in a "Health and Wellbeing Support Plan".

Written consent must be obtained from the adult receiving support prior to administering intimate care tasks. Where it has been deemed that a person lacks capacity to provide informed consent, a "best interests decision" should be taken by relevant professionals and family members and recorded within the Health and Wellbeing Support Plan.

Staff must have read and understood the "Health and Wellbeing Support Plan" for the person they are supporting, prior to administering any personal or intimate care.

The Health and Wellbeing Support Plan must detail the specific intimate personal care required, the level of support and how it is to be delivered with dignity in the least intrusive way. All persons in receipt of intimate or personal care will be involved in the creation of their individual support plan, together with relevant family members or professionals.

Staff who are providing intimate care must have appropriate and up-to-date training. The minimum training requirements are Safeguarding Training and Manual Handling training. Staff must

## **Personal and Intimate Care Policy**

also provide written confirmation that they have read and understood the Personal and Intimate Care policy.

### **Procedure and Guidelines for Intimate Care**

1. Staff must ensure that a high level of privacy, choice and control will be provided to the person they are supporting in all matters of intimate care.
2. Staff should never undertake tasks which people are able to perform themselves with sufficient time and support.
3. Individuals receiving Intimate Care should be offered as much consistency of care as possible so that they can develop a rapport with the staff.
4. Staff can administer Intimate Care for adults alone, but must inform a colleague when they leave the room to provide intimate care
5. Staff should ensure they follow the risk assessments associated with Intimate Care, including infection control and manual handling. All staff must wear the correct PPE throughout intimate care tasks; at minimum a disposable apron and gloves.
6. Staff should ensure they have the correct equipment/resources with them before starting intimate care, including their PPE products, and items such as continence bags, changing mats etc where these are specified in the Health and Wellbeing Support Plan.
7. Staff must include the person they are supporting in all aspects of the intimate care. Verbal or non-verbal consent should be obtained each time the procedure is carried out. They should explain each step of the intimate care to the person they are supporting, to ensure consent is 'informed'. Where the Health and Wellbeing Support Plan identifies that a person may lack capacity in relation to a particular procedure, the staff member may make a best interests decision and record this in the Intimate Care Record.
8. If a person declines/refuses Intimate Care, this should be reported immediately to the Designated Safeguarding Officer so that a discussion can take place as to possible reasons. All discussions should be recorded and the Health and Wellbeing Support Plan should be updated accordingly.
9. Staff should ensure they follow the information contained within the Health and Wellbeing Support Plan, which records specific information for each individual, such as what they can do for themselves and what products are required for their intimate care.
10. If staff observe any unusual markings, discolouration or swelling, they must record it in the Intimate Care Record and report to the Designated Safeguarding Lead.
11. Staff must be culturally sensitive and aware of different concepts of privacy, nudity and in/appropriate touch.
12. Staff must record all instances of Intimate Care in the Intimate Care Record.