



YOWSUN CARE INTIMATE PERSONAL CARE AND CONTACT POLICY

Policy Statement

This policy outlines Yowsun Care's procedures on how care workers employed by the organisation will be providing personal care to adults that receive such services from Yowsun Care. This policy explains concerns that may be raised when the care rendered to our clients might involve physical contact and touching. This policy is therefore intended to make clear the difference between appropriate and inappropriate contact and touching, and the procedures to be followed if inappropriate touching occurs.

The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 contain the following regulations that apply to intimate personal care.

Regulation 9: Person-centred Care — requires service providers to ensure that the care and treatment of service users must be appropriate, must meet their needs, and must reflect their preferences.

Regulation 10: Dignity and Respect — requires that service users must be treated with dignity and respect, including being treated in a caring and compassionate manner; personal preferences, lifestyle choices and choices relating to care and treatment of service users must be always respected by staff.

Regulation 11: Need for Consent — requires that care and treatment — including intimate personal care — is only provided with the consent of the relevant person.

The thrust of these regulations is to give the service user choice and control, to enable them to receive the right care, treatment, and support, and have their diversity and/or disabilities considered.

Definitions

Personal care is described in terms of the help provided to a person with their:

eating or drinking (including forms of tube feeding)

toileting (including in relation to the process of menstruation)

washing or bathing

dressing

oral care

the care of skin, hair and nails.

Personal care includes the acts of prompting and supervision of a person in relation to any of these activities, where the person is unable to take his or her own decisions about him or her or to give his or her informed consent to the activities being proposed (ie where the person might lack mental capacity and the activities have to be carried out in terms of the best interests).

In the carrying out of any of these activities our care staff are expected to respect the dignity of the person who is receiving their help. They must make sure that what they are doing is always in line with the person's wishes as reflected in their plan of care and that the person has consented to anything that is proposed (or a best-interests assessment has been made if the individual lacks mental capacity).

They will often need to obtain the person's consent by talking with the person and constantly checking out that what they are doing is consistent with the person's wishes and they are not causing any distress or discomfort.

Personal Contact

In providing any form of personal care, care workers must be aware that they will be in close personal contact with the person and they should also check how he or she might be feeling about this. Care workers should be aware of their own body position and how this might come across to the service user.

It is inevitable in the offering of personal care some form of physical contact will be made, which each service user will experience differently and not always consistently (depending on their mood, etc). Care workers must learn about how individuals feel about the personal care they are receiving from them at any time.

Care staff are made aware of any cultural factors that might account for some service users' responses in their training and supervision and briefing to carry out the tasks required.

Appropriate and Inappropriate Personal Contact

Individual service users will vary in their views on what they consider to be appropriate or inappropriate personal contact by their care workers. They are encouraged to express these so that they feel comfortable and safe, and care workers are also able to work safely with them.

Care workers are taught to recognise that there are some forms of personal contact that are inappropriate, because they are abusive and could result in disciplinary or even criminal actions being taken against them. These are clearly stated in the relevant Safeguarding Service Users in Care Homes from Abuse or Harm Policy.

Inappropriate personal contact will usually refer to the touching of breasts, genitalia and bottoms, but it could also include kissing, hugging, sidling and sexually suggestive movements that could be interpreted as inappropriate or abusive. This could occur in a variety of situations, including when being moved and transferred.

Care workers are warned against any such behaviour that presents any risks of harm to their service users and indeed to their own safety and personal integrity.

Intimate Personal Care

Service users who require help with intimate personal care that could include dressing, washing, bathing, etc are probably most at risk of inappropriate contact and touching. We are also aware that our care workers are also put at risk of accusations and allegations made against them while carrying out such tasks and that we have a duty of care to protect them as well from false allegations or misunderstandings that might arise.

In general, the policy is to encourage service users to do as much for themselves as possible in respect of any aspect of intimate personal care and for care workers to carry out these tasks only when the person is clearly unable to do so and after all risks to the service user and staff involved have been assessed.

All intimate care activities to be carried out are clearly described in the person's plan of care and staff are expected to comply with the instructions included there.

Care staff are expected to offer an immediate apology in the event of any accidental contact or touching that the person receiving the care (or the care staff member) might consider to be inappropriate.

If the person appears distressed or considers that the touching might have been deliberate and indicates that they are not satisfied by a simple apology, the care staff involved should suggest that the person might put in a formal complaint. They should report the matter to their line manager at the first opportunity, who might seek to address the issue as a complaint following the relevant procedures or if necessary, through safeguarding from abuse procedures.

Care staff members who consider that they are subject to inappropriate physical contact by service users while carrying out personal care should also raise the matter with their line manager so that the issues can be addressed through the relevant policies designed to protect staff from abuse.

Assessing and Managing Risk

The care service always carries out a risk assessment in relation to service users who might need intimate personal care to protect both the service user from potential abuse and their care workers from incorrectly being accused of abuse. The results will be included in the care and support plan, which will indicate if any special arrangements should be in place to control any risks.

These will depend on the individual situation but might include:

avoiding lone working and having two people to carry out the care, which will often be needed regardless for service users with intimate care needs arranging the care to be carried out in the presence of a “chaperone”, who could be another household member or care staff member who could discreetly observe the care being carried out; this would always require the consent of the service user with any arrangement agreed taking into account the need to maintain the person’s sense of dignity and any need for privacy and confidentiality close supervision and monitoring of the intimate care practices so that concerns and issues can be identified and addressed promptly careful arranging of the immediate care environment to minimise exposure and embarrassment and to reduce the need for physical contact and the risks from it.

Training

All care staff receive training on appropriate/inappropriate personal contact and touching and the associated procedures as part of their induction training.

Managers are also enabled to address issues arising with service users and through their own training, particularly in the use of supervision.

Signed:

_____Yowsun Care_____

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