# Intimate Care Policy



# Saint Mary's Primary School Greenlough

# September 2019

DATE	
Chair of Board of Governors	
Principal	
Date of Review	September 2020

#### Rationale

It is our intention, at St. Mary's Primary Greenlough, to develop independence in each child, however there will be occasions when help is required. Our intimate care policy has been developed to safeguard children and staff. It is one of a range of specific policies that contribute to our school's Pastoral Care Policy. The principles and procedures apply to everyone involved in the intimate care of children.

Children are generally more vulnerable than adults, therefore all staff involved with any aspect of pastoral care need to be sensitive to their individual needs.

Intimate care may be defined as any activity that is required to meet the personal needs of an individual child on a regular basis or during a one-off incident. Such activities can include:

- feeding;
- oral care;
- washing;
- changing clothes;
- toileting;
- menstrual care;
- first aid;
- and medical assistance treatments (such as enemas, suppositories, enteral feeds catheter and stoma care); and,
- supervision of a child involved in intimate self-care.

Parents have a responsibility to advise the school of any known intimate care needs relating to their child.

#### **Principles of Intimate Care**

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

- every child has the right to be safe;
- every child has the right to personal privacy;
- every child has the right to be valued as an individual;
- every child has the right to be treated with dignity and respect;
- all children have the right to be involved and consulted in their own intimate care to the best of their abilities;
- all children have the right to express their views on their own intimate care and to have such;
- views taken into account; and,
- every child has the right to have levels of intimate care that are appropriate and consistent.

#### **School Responsibilities**

- All staff (at St. Mary's Primary) working with children are vetted by the ELB/ CCMS. This includes students on work placement and volunteers.
- Vetting includes criminal record checks (Access NI checks) and two references.
- Only those <u>named</u> members of staff who are familiar with the intimate care policy and other pastoral care policies of the school are involved in the intimate care of children.
- Where anticipated, intimate care arrangements are agreed between the school and parents and, if appropriate, by the child.
- Consent forms are signed by the parent and stored in the child's file. (See Appendix 1)
- Staff should not undertake any aspect of intimate care that has not been agreed by parents and school and the child (if appropriate).
- Provision will be made for emergencies (ie where the named staff are on leave / off sick).
   Additional trained should be available to undertake specific intimate care tasks. We do not assume that someone else can do the task.
- Intimate care arrangements should be reviewed at least six months.
- The views of all relevant parties should be sought and considered to inform future arrangements.
- If a staff member has concerns about a colleague's intimate care practice he or she must report this to the designated teacher for child protection.
- If a child receives intimate care, the staff involved shall a record of this care on an agreed template. (See Appendix 2a).
   If a child receives regular intimate care e.g. 3 times daily, the staff complete the an

template (See Appendix 2b.)

Please note – that only in an emergency situation (or to determine the seriousness of an injury), will staff undertake any aspect of intimate care. (If so, the circumstances and details will be recorded on the agreed template in **Appendix 2a**. One of the two staff members present will report to the designated teacher for child protection or Principal and the parent, at the earliest possible time following the event.

#### **Guidelines for Good Practice**

- All children have the right to be safe and to be treated with dignity and respect. These guidelines are designed to safeguard children and staff. They apply to every member of staff involved with the intimate care of children.
- Young children and children with special educational needs can be especially vulnerable.
   Staff involved with their intimate care need to be particularly sensitive to their individual needs.
- All incidents of Intimate Care should be documented using the appropriate Record of Intimate Care form in **Appendix 2**.
- Staff also need to be aware that some adults may use intimate care, as an opportunity to abuse children. It is important to bear in mind that some forms of assistance can be open

to misinterpretation. Adhering to the following guidelines of good practice should safeguard children and staff.

#### 1. Involve the child in the intimate care

Try to encourage a child's independence as far as possible in his or her intimate care. Where a situation renders a child fully dependent, talk about what is going to be done and give choices where possible. Check your practice by asking the child or parent about any preferences (likes/dislikes) while carrying out the intimate care.

# 2. Treat every child with dignity and respect and ensure privacy appropriate to the child's age and situation.

Care should not be carried out by a member of staff working alone with a child.

#### 3. Make sure practice in intimate care is consistent.

As a child may have multiple carers a consistent approach to care is essential. Effective communication between all parties ensures that practice is consistent.

#### 4. Be aware of your own limitations

Only carry out activities you understand and feel competent with. If in doubt, ASK. Some procedures must only be carried out by members of staff who have been formally trained and assessed.

#### 5. Promote positive self-esteem and body image.

Confident, self-assured children who feel their body belongs to them are less vulnerable to sexual abuse. The approach you take to intimate care can convey lots of messages to a child about their body worth. Your attitude to a child's intimate care is important. Keeping in mind the child's age, routine care can be both efficient and relaxed.

#### 6. If you have any concerns you must report them.

If you observe any unusual markings, discolouration or swelling, report it immediately to the designated teacher for child protection or in her absence report it to the Deputy Designated Teacher. If a child is accidentally hurt during the intimate care or misunderstands or misinterprets something, reassure the child, ensure their safety and report the incident immediately to the designated teacher. When reporting any concerns, record any unusual emotional or behavioural response by the child. (Use the "Record of concerns sheet" from Safe Guarding/Child Protection Policy. **See Appendix 3** of this policy)

#### Hygiene

All staff must be familiar with normal precautions for avoiding infection. Gloves and protective clothing/equipment to be used as necessary.

#### **Working With Children of The Opposite Sex**

There is positive value in both male and female staff being involved with children. Ideally, every child should have the choice for intimate care but the current ratio of female to male staff means that assistance will more often be given by a woman.

The intimate care of boys and girls can be carried out by a member of staff of the opposite sex with the following provisions:

- when intimate care is being carried out, all children have the right to dignity and privacy,
   i.e they should be appropriately covered, the door closed or screens/curtains put in place;
- a second adult in the room
- if the child appears distressed or uncomfortable when personal tasks are being carried out, the care should stop immediately. Try to ascertain why the child is distressed and provide reassurance;
- report any concerns to the designated teacher for child protection and make a written record; and,
- parents must be informed about any concerns.

#### **Communication with Children**

It is the responsibility of all staff caring for a child to ensure that they are aware of the child's method and level of communication. Depending on their maturity and levels of stress children may communicate using different methods - words, signs, symbols, body movements, eye pointing, etc. To ensure effective communication:

- make eye contact at the child's level;
- use simple language and repeat if necessary;
- wait for response;
- continue to explain to the child what is happening even if there is no response; and,
- treat the child as an individual with dignity and respect.

#### **Consent for Intimate Care.**

Parents are requested to complete Appendix 1(Personal Care Consent Form) at the beginning of each academic year. Parents may withdraw their consent at any time by writing to the Principal.

It is important to note that in addition to the information in the Intimate Care Policy, reference should also be made to the Child Protection and Pastoral Care Policies.

#### Review

This policy will be reviewed annually.

## Appendix 1:



## Parental permission for Intimate Care

Child's name
Class Primary
Should it be necessary, I give permission for my child to receive
intimate care (e.g. help with changing or following toileting).
I understand that staff will endeavour to encourage my child to be
independent.
I understand that I will be informed discretely should the occasion
arise.
Parent/Guardian Signature:
Date:

## Appendix 2:

## **Record of Intimate Care**



## Copy to Designated Teacher / Red File

Name of child		
Date :-	Time :-	
Comments (reason for care, etc.)		
Staff members involved		
A	B	
Communication with parent		

#### **CONFIDENTIAL**



#### **NOTE OF CONCERN**

#### **CHILD PROTECTION RECORD - REPORTS TO DESIGNATED TEACHER**

Name of Pupil:
Year Group:
Date, time of incident / disclosure:
Circumstances of incident / disclosure:
Nature and description of concern:
Parties involved, including any witnesses to an event and what was said or done and by whom:
Action taken at the time:
Details of any advice sought, from whom and when:

Any further action taken:	
Written report passed to Designated Teacher:	Yes: No:
If 'No' state reason:	
Date and time of report to the Designated Tea	acher:
Written note from staff member placed on pu	pil's Child Protection file
Yes No	
If 'No' state reason:	
Name of staff member making the report:	
Signature of Staff Member:	Date:
Signature of Designated Teacher:	Date: