

Intimate Care Policy

Moneynick Primary School

January 2021

Updated November 2024



Signed: _____ (Principal)

Date: _____

Signed: _____ (Chair)

Date: _____

RATIONALE

It is our intention 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 Pastoral Care policy. The principles and procedures apply to everyone involved in the intimate care of children.

Children are generally more vulnerable than adults and 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:

- toileting
- feeding
- oral care
- washing
- changing clothes
- first aid and medical assistance
- supervision of a child involved in intimate self-care

Parents have a responsibility to advise their 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
- every child has the right to have levels of intimate care that are appropriate and consistent

SCHOOL RESPONSIBILITIES

All staff working with children are vetted by Access N.I. This includes all volunteers working with our pupils. Vetting includes criminal record checks and two references.

Only those members of staff who are familiar with the intimate care policy and other pastoral care policies of the partnership 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. Only in an emergency would staff undertake

any aspect of intimate care that has not been agreed by parents and the school. Parents would then be contacted immediately.

Intimate care arrangements should be reviewed at least every 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 of the school.

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.

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 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.

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. Report and record any unusual emotional or behavioural response by the child. A written record of concerns must be made available to parents and kept in the child's personal file.

WORKING WITH CHILDREN OF THE OPPOSITE SEX

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, ie they should be appropriately covered, the door closed or screens/curtains put in place
- 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
- 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
- treat the child as an individual with dignity and respect

TOILETING

Our expectation is that young children should have achieved continence when they are admitted to school. We recognise that young children vary widely in their levels of maturity and in achieving continence. We also recognise that children may have a lapse in their continence because of trauma, onset of sudden disability, emotional upset or health problems. We will listen to the pupil. See appendix.

In line with Child Protection procedures, we will do our best to support children in partnership with the home. In some circumstances staff may need, and will reserve the right, to contact parents and request that the child should be collected from school. The school will seek annual permission from parents to assist any child who may have a toileting, or other accident, should the need arise.

Staff will respect children's privacy at all times and will encourage independence and good hygiene at toileting times.

REVIEW

This policy will be reviewed annually.



Intimate Care

I have read Moneynick’s policy on intimate care and give permission for a member of staff to deal with my child/ren whenever necessary. I understand that intimate care can include:

- toileting;
- feeding;
- oral care;
- washing;
- changing clothes;
- first aid and medical assistance; and
- supervision of a child involved in intimate self-care.

Names of children for whom my permission is given:

Parent’s Signature:

Date:



Record of Intimate Care for:

Your child required intimate care today. This was carried out in accordance with school policy, ie in the presence of a witness and with respect for the privacy, needs and wishes of the child. When given appropriate attention the child then continued happily with the school day.

Please talk to your child about the incident and contact school if you have any concerns.

Carer: _____ Witness: _____

(This copy goes to the Parent/Guardian) Date: _____



Record of Intimate Care for:

Your child required intimate care today. This was carried out in accordance with school policy, ie in the presence of a witness and with respect for the privacy, needs and wishes of the child. When given appropriate attention the child then continued happily with the school day.

Please talk to your child about the incident and contact school if you have any concerns.

Carer: _____ Witness: _____

(This copy goes to the principal) Date: _____

Record of Intimate Care

Name of Child _____ Class _____

Date	Care Provided	Signatures (of Care Givers)	

Appendix 1

Communication Proforma for Intimate Care

Name: _____

Date: _____

I communicate using words / signs / communication book / communication aid / body movements.

I indicate my likes / preferences by _____

I indicate my dislikes by _____

I show I am happy by _____

and unhappy by _____

If appropriate, please complete the following:

When I need to go to the toilet I _____

When I need changed I _____

Additional information
