

Agreed at BOG  
meeting on 10/5/21.

Signed by  
Chair  
11/5/21.

# ***St Mary's Primary School Altinure***



## **INTIMATE CARE POLICY AND GUIDELINES REGARDING CHILDREN**

***Approved by Governors: 10.05.21  
To be reviewed: Term 3 -2023***

## **ST MARY'S PS RESPONSIBILITIES**

All staff working with children must be vetted by St. Mary's PS Altinure. This includes students on work placement and volunteers. Vetting includes:

- Access NI Check
- Pre Employment Checks
- Two Independent references

**Only** named staff identified by St. Mary's Primary School should undertake the intimate care of children. These named people are teaching staff and classroom assistant staff only.

The Principal and Governors must ensure that all staff undertaking the intimate care of children are familiar with, and understand the Intimate Care Policy and Guidelines together with associated Policy and Procedures e.g. ACPC Regional Policy and Procedures 2005, Safeguarding Vulnerable Groups (Northern Ireland) Order 2007.

All staff must be trained in the specific types of intimate care and carry out and fully understand the Intimate Care Policy and Guidelines within the context of their work.

Intimate care arrangements must be agreed by the school, parents/carers and child (if appropriate).

Intimate care arrangements must be recorded in the child's personal file and consent forms signed by the parents/carers and child (if appropriate).

Staff should not undertake any aspect of intimate care that has not been agreed between the Agency, parents/carers and child (if appropriate).

Agencies need to make provisions for emergencies i.e. a staff member on sick leave. Additional trained staff should be available to undertake specific intimate care tasks. Do not assume someone else can do the task.

Intimate care arrangements should be reviewed at least six monthly. The views of all relevant parties, including the child (if appropriate), should be sought and considered to inform future arrangements.

If a staff member has concerns about a colleague's intimate care practice, they must report this to their Principal Mrs Redmond or class teacher.

## **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.

Disabled children can be especially vulnerable. Staff involved with their intimate care need to be 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 care tasks/treatments can be

**Please refer to:**

- *Regional Area Child Protection Committee Child Protection Procedures – April 2005*
- *DENI Child Protection and Pastoral Care Guidance 1999*
- *Safeguarding Vulnerable Groups (Northern Ireland) Order 2007*

**WORKING WITH CHILDREN OF THE OPPOSITE SEX**

**Principles:**

- There is a positive value in both male and female staff being involved with children.
- Ideally, every child should have the choice of carer for all their intimate care.
- The individual child's safety, dignity and privacy are of paramount importance.

*The practical guidelines set out below, are written in the knowledge that the current ratio of female to male staff means we are far less likely to be able to offer the choice of same sex carer to male children.*

**General Care:**

*Male and female staff can be involved with children of either sex in:*

- a. Key-working and liaising with families
- b. Co-ordinating of and contribution to a child's review
- c. Meeting the development, emotional and recreational needs of the children
- d. Escorting the children between sites, on outings and to clinics unless intimate care is needed.

**Intimate Care:**

Wherever possible, boys and girls should be offered the choice of carer and second carer. Where there is any doubt that a child is able to make an informed choice on these issues, the child's parents are usually in the best position to act as advocates.

It may be possible to determine a child's wishes by observation of their reactions to the intimate care they receive. Do not assume that a child cannot make a choice.

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

- a. The delivery of intimate care by professionally qualified staff will be governed by their professional code of conduct in conjunction with agency policy and procedures.
- b. Staff who are not governed by a professional code of conduct must follow policy and procedures in operation within their agency and direction and agreement must be provided by the Designated Manager/Principal.
- c. 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.

St Mary's Altinure – Intimate Care Policy

**Appendix 1**

**Communication Proforma for Intimate Care: How I Communicate**

**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** \_\_\_\_\_

**Unhappy by** \_\_\_\_\_

If appropriate please complete the following:

**When I need to go to the toilet I** \_\_\_\_\_

**When I get changed I** \_\_\_\_\_

**Additional Information** \_\_\_\_\_

\_\_\_\_\_

**Speech and Language Therapist**

**Occupational Therapist**

**Key worker/s** \_\_\_\_\_

**Contact Number/s** \_\_\_\_\_

**Parent/Carer signature** \_\_\_\_\_

