
HOLLYBANK PRIMARY SCHOOL

INTIMATE CARE POLICY



Engage, Empower, Excel

Date of next policy review	August 2024
Name of person responsible for this policy	L Brett
Issued to	Staff, Governors, Parents
Date of issue	August 2023

Rationale

It is our intention to develop independence in each child, however we recognise that there will be times when help is required. Our Intimate Care Policy has been developed to safeguard children and staff. It is influenced by the HSSPS (Department of Health, Social Services and Public Safety) and takes into consideration documentation provided by RACPD (Regional Area Child Protection Committee) in relation to policy and procedures 2005 & add-ons 2008. It forms part of the school's suite of policies relating to Child Protection and Pastoral Care. The principles and procedures apply to everyone involved in the intimate care of children.

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

Definition of Intimate Care

Intimate care may be regarded 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. Parents have a responsibility to advise staff of the intimate care needs of their child, and staff have a responsibility to work in partnership with children and parents.

Such activities may include:

- toileting;
- feeding;
- oral care;
- washing;
- dressing/undressing;
- first aid and medical assistance; and
- supervision of a child involved in intimate self-care

In extreme medical cases, activities may include:

- treatments such as enemas, suppositories, enteral feeds: and
- catheter and stoma care

Medical Cases

The above will only be considered when:

- a medical care plan is in place;
- written consent has been provided by the parent, NEELB and the child's medical consultant
- a member of staff has been employed to carry out a medical activity; and/or the member of staff has been sufficiently trained to carry out the necessary duties

Medical advice will be taken into consideration where appropriate. All staff are advised to seek advice from their professional body or union before undertaking activities that require intimate care.

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

School Responsibilities

All members of staff working with children are vetted by NEELB. This includes students and volunteers and forms part of our separate policy on Child Safeguarding.

Only those 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.

Anticipated intimate care arrangements which are required on a regular basis are agreed between the school and parents, and when appropriate and possible, by the child.

In such cases consent forms are signed and stored in the child's record file.

Intimate care arrangements for any child who requires this support on a regular basis should be reviewed at least every six months.

The views of all relevant parties should be sought and considered to inform any future arrangements. Any amendments to arrangements should be recorded for all parties involved.

In the event that a member of staff, who is responsible for the intimate care of a child, is sick or taking part in offsite training then the school will make every effort to ensure that someone can assume this role until their return. However, this does not extend to any intimate care activities that require training. **Parents will be kept informed and may be required to make alternative arrangements that ensure the needs of their child are met.**

Parents of children starting Primary One are asked to give permission for staff to attend to the intimate care of their child (with particular reference to toilet accidents or illness) should need arise (see Appendix A).

Where a child has more complex needs that require a regular activity of intimate care then a separate consent form must be completed and signed by the relevant people.

Only in an emergency would staff undertake any aspect of intimate care that has not been agreed by the parents. The act of intimate care would be reported to a member of staff and parents at the earliest possible time following the event.

If a staff member has concerns about a colleague's intimate care practice he or she must report it to the Designated Teacher for Child Protection, Mrs. N Culbert or the Deputy Designated Teacher for Child Protection, Miss L. Brett.

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 Record of Intimate Care form (Appendix C)

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 open to misinterpretation.

Adhering to these guidelines of good practice should safeguard children and staff.

Staff will endeavour to:

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, where possible, give choices.

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 the 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.

5. Promote positive self-esteem and body image

Confident, self-assured children who feel their bodies belong to them are less vulnerable to sexual abuse. The approach you take with 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 or the Deputy Designated Teacher for Child Protection.

If a child is accidentally hurt during intimate care or misunderstands or misinterprets something, reassure the child, ensure their safety and report the incident to the DT or DDT. 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.

Hygiene.

All staff must be familiar with normal precautions for avoiding infection and should ensure the use of appropriate protective equipment when necessary, for example, protective, disposable latex/vinyl gloves.

Working with Children of the Opposite Sex

There is positive value in both male and female staff being involved with children. Where possible, boys and girls should be offered the choice of carer and second carer. 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 screen/curtains put in place;
- if the child appears to be 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 DT or DDT and make a written record;
- parents must be informed about any concern

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 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.

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.

Please refer to:

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

Parental permission for Intimate Care Primary One

I give permission for Hollybank Primary School to provide intimate care for my child, with help changing, after toileting or as a result of an accident. I understand that the school staff carrying out this care will do so in line with the Intimate Care policy of the school. I further understand that I as the adult with parental responsibility must make reasonable arrangements in the event that the school is unable or unwilling to carry out the intimate care activity.

I confirm that I have full parental responsibility as named on my child's birth certificate or provided to me by court order or through the adoption of the named child.

Name of Parent _____ (Print)

Signature of parent _____

Date _____

Intimate Care Policy
Appendix A

Intimate Care Consent for Children Requiring Regular Care

Part One to be completed by parent

Name of Child:

Date of Birth:

Medical Number:

Reasons for regular intimate care:

Name of Doctor/Consultant/Other supporting need for school to provide intimate care (please provide a medical report which collaborates need for intimate care):

Intimate Care requirements of the child:

Intimate care required of Staff member (Primary Staff Carer):

Second Carer (if any) in event that Primary Carer cannot carry our intimate care:

I give permission for Hollybank Primary School to provide intimate care for my child, _____, in the areas stated above. I understand that the school and the named staff carrying out this care will do so in line with the Intimate Care policy of the school. I further understand that in the event that the staff named as carers are unable to carry out the care activities listed within this form, that I, as the adult with parental

responsibility must make other reasonable arrangements until such time as the named staff are in a position to continue their duties in relation to intimate care.

I confirm that I have full parental responsibility as named on my child's birth certificate or provided to me by court order or through the adoption of the named child.

Name of Parent _____ (Print)

Signature of parent _____

Date _____

Intimate Care Policy
Appendix B

HOLLYBANK PRIMARY SCHOOL

Record of Intimate Care

Name of child	Date	Time	Comments	Staff involved	Signature