

Brookeborough Primary School



Intimate Care Policy

The school will review this policy in March 2025

Signed: Mr B Ovens (BOG)

Date: 25.3.24

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Date: 25.3.24

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Introduction

The Intimate Care Policy and Guidelines Regarding Children have been developed to safeguard children and staff. They apply to everyone involved in 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. The Intimate Care Policy and Guidelines should be read in conjunction with the Area Child Protection Committee's Regional Policy and Procedures April 2005.

The purpose of this policy is:

- To safeguard the rights and promote the best interests of the children.
- To ensure children are treated with sensitivity and respect, and in such a way that their experience of intimate care is a positive one.
- To safeguard adults required to operate in sensitive situations.
- To raise awareness and provide a clear procedure for intimate care.
- To inform parents/carers in how intimate care is administered.
- To ensure parents/carers are consulted regarding the intimate care of their child.

Definition

Intimate care may be defined as any activity required to meet the personal care needs of each individual child. 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. Intimate care can include:

- Feeding
- Oral care
- Washing
- Dressing/undressing
- Toileting
- Menstrual Care
- Photographs
- Treatments such as enemas, suppositories, enteral feeds
- Catheter and stoma care
- Supervision of a child involved in intimate self-care

Principles of Intimate Care

The following are the fundamental principles upon which the Policy and 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.

- Every child has the right to be involved and consulted in their own intimate care to the best of their abilities.
- Every child has the right to express their views on their own intimate care and to have such views considered.
- Every child has the right to have levels of intimate care that are as consistent as possible.

SCHOOL RESPONSIBILITIES

- All staff working with children must be vetted by the Education Authority/School. This includes students on work placement and volunteers. Vetting includes:
 - Access NI checks
 - Pre-employment checks
 - Two independent references
- **Only** named staff identified by the school should undertake the intimate care of children.
- The Principal 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 that they 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). Page 5 of 17 Intimate Care Policy and Guidelines Regarding Children
- 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 school, 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 designated 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 open to misinterpretation. Adhering to these guidelines of good practice should safeguard children and staff.

Involve the child in their intimate care

Try to encourage a child's independence as far as possible in his / her intimate care. Where the child is fully dependent talk with them about what is going to be done and give them choice where possible. Check your practice by asking the child / parent any likes / dislikes while carrying out intimate care and obtain consent.

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

A lot of care is carried out by one staff member / carer alone with one child. The practice of providing one-one intimate care of a child alone is supported, unless the activity requires two persons for the greater comfort / safety of the child, or the child prefers two persons.

Make sure practice in intimate care is consistent

As a child can have multiple carers a consistent approach to care is essential. Effective communication between parents / carers / agencies ensures practice is consistent.

Be aware of own limitations

Only carry out care activities you understand and feel competent and confident to carry out. If in doubt, ASK. Some procedures must only be carried out by staff who have been formally trained and assessed e.g., enteral feeding, rectal diazepam. Page 8 of 17 Intimate Care Policy and Guidelines Regarding Children

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 relaxed, enjoyable and fun.

If you have any concerns, you must report them.

If you observe any unusual markings, discolourations or swelling including the genital area, report immediately to your designated teacher. If during the intimate care of a child you accidentally hurt them, or the child appears to be sexually aroused by your actions, or misunderstands or misinterprets something, reassure the child, ensure their safety, and report the incident immediately to the Designated Teacher/ Deputy Designated Teacher. Report and record any unusual emotional or behavioural response by the child. A written record of concerns must be made and kept in the child's personal file. Page 9 of 17 Intimate Care Policy and Guidelines Regarding Children It is important to follow your Agency's reporting and recording procedures. Parents / carers must be informed about concerns.

Supporting dressing/undressing

Sometimes it will be necessary for staff to aid a child in getting dressed or undressed particularly in Early Years. Staff will always encourage children to attempt undressing and dressing unaided.

Providing comfort or support

Children may seek physical comfort from staff. Where children require physical support, staff need to be aware that physical contact must be kept to a minimum and be child initiated. When comforting a child or giving reassurance, the member of staff's hands should always be seen, and a child should not be positioned close to a member of staff's body which could be regarded as intimate. If physical contact is deemed to be appropriate staff must provide care which is suitable to the age, gender, and situation of the child.

If a child touches a member of staff in a way that makes him/her feel uncomfortable this can be gently but firmly discouraged in a way which communicates that the touch, rather than the child, is unacceptable.

Changing Children

If 'accidents' occur dry items will be provided for the child to change themselves into, and wet items will be sent home for washing. The parent will be informed (by a note home) and requested to return the borrowed items of clothing when laundered.

If there is an occurrence of heavier soiling or vomiting, this may require staff to provide care at a very personal level. Staff will follow set procedures for this intimate care:

- The child will be removed to a less public place to maintain dignity and avoid a feeling humiliation.
- Parents may be contacted at the discretion of staff

Please note: If parents cannot be contacted school staff will decide on the most appropriate care to minimise any stress, discomfort, or anxiety the child may be experiencing.

If staff are providing intimate care due to accidental and occasional soiling two members of staff will be present and an Intimate Care Form will be completed if a child has had a toileting accident or needs clothes changed. This will be sent home to the parent to inform them of the incident and for them to sign and acknowledge they have been informed of the situation.

The well being and dignity of the child will always remain paramount during any incident requiring intimate care.

If a child needs to be cleaned, staff will make sure that:

- Protective gloves are worn.
- The procedure is discussed in a friendly and reassuring way with the child throughout the process.
- The child is encouraged to care for him/herself as far as possible.
- Physical contact is kept to the minimum possible to carry out the necessary cleaning.

- Privacy is given appropriate to the child's age and the situation.
- All spills of vomit, blood or excrement are wiped up and flushed down the toilet.
- Any soiling that can be, is flushed down the toilet.
- Soiled clothing is put in a plastic bag, unwashed, and sent home with the child.

Menstrual Wellbeing and Period Dignity

Linked to separate 'Period Dignity Policy'

The school will provide appropriate period dignity education and encourage pupils to make use of free period products provided in school, rather than wearing poor quality of unhygienic products. Pupils will be advised of the teachers they should approach if they have any issues. Staff will be vigilant for any children who are distressed or experiencing discomfort due to menstruation. Children will be treated with care and sensitivity. Pupils will be given support and period products will always be available.

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 developmental, 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 can 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 Teacher/ 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.
- (d) If the child appears distressed or uncomfortable when personal care tasks are being carried out, the care should stop immediately. Try to ascertain why the child is distressed and provide reassurance.
- (e) Report concerns to your Designated Teacher and make a written record.
- (f) Parents / carers must be informed about 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. Children communicate using different methods e.g., words, signs, symbols, body movements, eye pointing.

To ensure effective communication:

- Ascertain how the child communicates e.g., consult with child, parent / carer and, if appropriate, communication needs must be recorded. If further information is required, please consult with the child's Speech and Language Therapist.
- 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



Changing Consent Form

From time to time, children will have toileting accidents and/or arrangements need to be agreed for daily changing in particular cases. It is our policy to deal with these incidents/requirements immediately in order to make your child comfortable and save embarrassment. In line with the School Policy we will contact you to make you aware of the situation. If we are unable to contact you or you are unable to come to school we would appreciate written consent to change your child.

Please complete and return this form to the school.

Name of Pupil: _____

Class: _____

I give my consent for a member of staff to help change my child as required and/or if he/she has a toileting accident in school. I am aware that I will receive a written acknowledgement from the school about the changing issue.

Signed: _____ **Parent/Guardian**



Acknowledgment of Personal Care Given to Child Needing Changing

In line with the School's Intimate Care Policy your child had a toileting accident on _____ and need changed. The school made telephone contact and on your direction the child was changed by _____

Please complete:

Name of Pupil: _____

Class: _____

My child had a toileting accident. I was informed that this happened and my child was cared for immediately.

Reason for changing your child:

Signed: _____ **Parent/Guardian**