



# Intimate Care Policy



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# BALLOUGRY PRIMARY SCHOOL INTIMATE CARE POLICY

## 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.

Children with a disability 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.

## 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
- 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 taken into account.
- Every child has the right to have levels of intimate care that are as consistent as possible.

## **SCHOOL RESPONSIBILITIES**

Management 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).
- If a child has only specific toileting needs school staff, in liaison with parents, should complete Appendix 2. A home school links toileting book will be established and sent home, outlining intimate care taken place that day. If a child has a complex interaction of intimate care needs (e.g. catheterisation) Appendix 1 and 3 should be completed. This should be completed in liaison with parents and any external agencies involved. A record of any personal care undertaken should also be kept on a daily basis (Appendix 7).
- If Appendix 2 or 3 is implemented a consent form must be obtained (Appendix 4).
- Ballougry Primary School needs 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.

- 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 the designated/deputy designated teacher for Child Protection.
- If a child requires very occasional intimate care e.g. fall in playground, a one-off toilet accident or vomiting this should be recorded in Appendix 5 and an information note (Appendix 6) sent home to parents on the day the intimate care has taken place. All staff will have copies of both Appendix 5 and 6 in their classroom.
- In the situation where a child needs some assistance with intimate care, a permanent member of staff will help but toilet doors should be left unlocked. Another member of staff should be informed so that there is openness and shared information about what help was given. It should be noted that by the time a child starts school they will normally be expected to be independent in terms of their use of toilet facilities.

## **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. Staff also need to be aware that some adults may use intimate care as 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. Please refer to:

- ❖ **DENI Child Protection & Pastoral Care guidance 1999/10**
- ❖ **Safeguarding Vulnerable Groups (Northern Ireland) Order 2007**
- ❖ **Child Protection Support Service for Schools - Governor's handbook - January 2007**
- ❖ **Circular 03/13 Guidance for schools on the Welfare and Protection of Pupils - Education and Libraries (NI) Order 2003**
- ❖ **Circular 06/06 Guidance on safer recruitment practices for education authorities (Access NI)**
- ❖ **Circular 06/07 Guidance for schools on the employment of substitute teachers (NISTR)**
- ❖ **Circular 06/08 Strand 3 Guidance for schools on the requirement for child protection training in relation to interviewing and selection panels**

- ❖ **Circular 06/09 Guidance on the vetting of paid and unpaid staff (Access NI)**
- ❖ **Circular 06/25 Guidance on the requirement for vetting of school governors (Access NI)**

### **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 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, discolouration 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 your designated teacher.
- Report and record any 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 reporting and recording procedures.
- Parents / carers must be informed about concerns.
- 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)

Ideally, every child should have the choice of carer for all their intimate care. The delivery of intimate care by professionally qualified staff will be governed by Ballougray P.S.'s professional Code of Conduct in conjunction with the School's policy and procedures and in agreement with the designated teacher for Child Protection/Principal

- The individual child's safety, dignity and privacy are of paramount importance.
- 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.
- 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.
- Report concerns to your Designated Teacher and make a written record.
- 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. e.g. words, signs, symbols, body movements, eye pointing.
- 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.

Signed (Principal): \_\_\_\_\_

Signed (Chairperson of the Board of Governors):

\_\_\_\_\_

Date: \_\_\_\_\_

