



PARKGATE

PRIMARY SCHOOL

Version	Date	Revision Author	Summary of Changes
1	November 2018	P Peden	Review of Policy
2	May 2020	V Ferguson	Amended policy to reflect new school staffing structure
3	December 2021	V Ferguson	Amended policy in line with CPSS regional policy

Ratified by Governors: March 2022

Review: March 2023

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.

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:

- Every child has the right to be safe
- Every child has the right to be treated with dignity and respect
- Every child has the right to be valued as an individual
- Every child has the right to personal privacy
- 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.

The information below relates to those children in our school who have a physical disability or learning difficulty.

School Responsibilities

All staff working with children are vetted by the Education Authority. This includes students on work placement and volunteers who may be unsupervised with children. Vetting includes:

- Access NI checks
- Pre-employment checks
- Two independent references

Only named identified staff should undertake the intimate care of children.

The Principal/Designated teacher for child protection 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 and 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 school, parents/careers and child (if appropriate).

Parkgate 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 Teacher/ Deputy 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 are also 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. Where a child has been identified as having a medical or learning need 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.

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/ Deputy 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/ 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 nursing / medical notes / personal file.
- It is important to follow your 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

WORKING WITH CHILDREN OF THE OPPOSITE SEX

Principles:

- 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.

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:

- The delivery of intimate care by professionally qualified staff will be governed by Parkgate Primary School professional Code of Conduct in conjunction with the School's policy and procedures and in agreement with the Designated Teacher for Child Protection/Principal.
- 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/Deputy 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.

Children communicate using different methods e.g. words, signs, symbols, body movements, eye pointing.

To ensure effective communication:

- Staff will ascertain how the child communicates e.g. consult with child, parent / carer and, if appropriate, communication needs will be recorded.
- 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.

The information below relates to those children in our school who do not have a physical disability or learning difficulty.

Changing after Accidents

If a child requires very occasional assistance due to:

- a. Sickness
- b. A toileting accident
- c. A playground fall
- d. Splashing during water play
- e. Adverse weather

An information note will be sent home to parents on the day the assistance has taken place.

Written permission of a parent / carer is necessary. This will be sought in the parent's / carer's Induction File, "Parental Reply Slips" section.

From time to time in school young children may need assistance, i.e. help with changing of clothes after a wetting.

Soiling or vomiting incidents are generally linked to episodes of illness and can spread infection. As such staff will contact parents/carers to take their child home.

Should children wet themselves, school staff will help by providing spare clothing if available. If the child is able they will be encouraged to change their clothing. In the situation where a child needs some assistance with changing, another member of staff will be present so that there is openness and shared information about what help was given. Members of staff will help but will remain outside the toilet door and talk the child through changing themselves. **It should be noted that by the time a child starts school they will be expected to be independent in terms of their use of toilet facilities.**

If this situation does occur the parent will be informed by note that day and we will keep a written record of the incident(s) on our official form – see Appendix 1. We will use children's initials to provide anonymity. For incidents of soiling or vomiting a note will be made on SIMS when recording the absence.

If a child soils their clothes in school, the parent or other appropriate contact person will be contacted to take the child home. Should they not be available to help or we are unable to contact them, then the child's clothes will be changed for their own comfort. The same set of guidelines as mentioned previously will apply.

These procedures are designed to protect both pupils and staff. The School wishes to ensure that we operate a system which is open and yet caring.

Should any member of staff have concerns about a child or a situation they should report these to a Designated Teacher or to the Principal. If a parent or carer has concerns about a child or questions about a situation in school, they should contact the Principal.

A positive working relationship between home and school is a major factor in providing care and security for the children. This working relationship thrives upon openness, effort and trust. We will do all in our power to promote this in our dealings with children, parents and the wider community.

Review Timescale

In order to ensure that this policy is meeting the needs of our school community positively and effectively, its content and implementation will be reviewed annually and revised when necessary.

Legislative changes may require that revision is necessary before the scheduled time. If this is the case, it will be overseen by the Principal, in consultation with the relevant parties

Mrs V Ferguson
Principal

March 2022

To be reviewed: March 2023

This policy has been ratified by the Board of Governors of Parkgate Primary School, signed by the Chair of the Board of Governors and the Principal and is now accepted as school policy.

Appendix 1

Permission for Intimate Care

Child:	
DOB:	
Address:	
Parent/Carer:	
I/we give permission for the assistance detailed overleaf to be provided to my/our child, and will advise the school of any change that may affect this provision.	
Signed:	
I, the child, give permission for the assistance detailed overleaf to be provided to me.	
Signed:	

Appendix 2

Intimate Care Plan

Pupil: DOB:		
Diagnosis:		
Assistance required:		
Timetable:		
Persons Assisting:		
Alternative arrangements:		
Location/equipment		

Designation	Signed	Date
Parent		
Pupil		
Assistant/s		
Principal		

Appendix 4

NOTIFICATION OF A CHANGE OF CLOTHES.



Your child required a change of clothes today for the reason below.

- a. Sickness
- b. A toileting accident
- c. A playground fall
- d. Splashing during water play
- e. Adverse weather
- f. Other

If other, please state reason:

Date:

Time:

Signed: _____
