

# Carryduff Primary School

## Intimate Care Policy

### 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
- Supervision of a child involved in intimate self-care
- Cleaning up a child after wetting/soiling accident

### 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

- All staff working with children must be vetted by the SEELB.

Vetting includes:

- Access NI checks
- Only vetted staff identified by your Agency 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.
- Ongoing intimate care arrangements must be agreed by the school, parents / carers and child (if appropriate).
- Ongoing 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).
- The school needs to make provisions for emergencies i.e. a child wets or soils themselves
- Intimate care arrangements that have been specially agreed with a parent should be reviewed at least annually. 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 Child Protection officer.

## 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.**

Care can be 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**

A child with special needs can have multiple carers so a consistent approach to care is essential. Effective communication between parents / carers / agencies / school 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.

**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.

**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 Child Protection 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 Child Protection 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 medical notes / personal file.

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:

- 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) Keyworking 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.

### 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 school 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 Principal.
- (b) 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.

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**Emergency Intimate Care  
Good Practice Checklist for Staff**

Such care might be necessary with;

*A child who has wet or soiled themselves*

*A child who has been hurt and treatment requires removal of clothing*

- Let another member of staff know who requires care and what you intend to do
- Ensure the child's dignity at all times; they should be appropriately covered, door closed.
- Reassure the child and tell them what you plan to do
- Listen to the child's wishes
- If they are distressed or protest, stop the care immediately and seek advice or assistance from another member of staff
- Report the duty of intimate care to a senior member of staff following the event
- Inform the parent about the care that was administered:  
Bump note  
Phone/Talk to the parent about the incident
- Male staff should not perform duties of intimate care with a female child
- If you have any concerns regarding the child report them immediately to the designated child protection teacher – Mrs Humphries