TOREAGH PRIMARY SCHOOL



Intimate Care Policy

Date: April 2019

Review date: April 2022

RATIONALE

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 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.

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 need 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.

REPONSIBILITIES

- All staff working with children must be vetted by Access N.I. This includes students on work placement and volunteers. Vetting includes:
- Only named staff identified by 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.
- 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).
- 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).
- Staff 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 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 their designated teacher / Principal.

GUIDELINES FOR GOOD PRACTICE

Staff 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 the child to be independent.

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

Make sure practice in intimate care is consistent.

Be aware of own limitations. Only carry out care activities you understand and feel competent and confident with. If in doubt ask.

Promote positive self-esteem and body image.

If you have any concerns you must report them.

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 the school's reporting and recording procedures.

Parents / carers must be informed about concerns.

Please refer to:

> DENI Child Protection & Pastoral Care Guidance 1999.

Staff identified to undertake Intimate Care Duties

All permanent members of teaching staff:

Miss Morrow Mrs. Wells Miss Fleming Mrs Robson Mrs Ellison

All permanent classroom assistants: Miss Hunter Miss Moore (one-to-one general assistant) Mrs McKnight (one-to-one general assistant)

• Where possible more than one member of staff will be present.

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INTIMATE CARE FORM

To be completed each time a child requires changing of clothing due to an incident such as wetting and / or soiling themselves or being physically sick.

DATE	TIME	CHILD'S NAME	YEAR	INCIDENT – what, where, etc.	ACTION TAKEN	SIGNATURE OF STAFF

Notes:

- It may be useful to devise a coding system e.g. Initials only of the children rather than their full name.
- The Intimate Care Forms should be regularly reviewed to identify if there are frequent situations in relation to a child or if there are frequent situations happening in a certain part of the room etc.
- Once completed, the form should be placed inside Class Safeguarding Report Folder.