St Peter’s PS****

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 **Intimate Care Policy**

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**February 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**

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).
* St Peter’s 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 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 manager/teacher.
* 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 Personal Care Record Book and an information note sent home to parents on the day the intimate care has taken place.
* 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. 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 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, (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 there is a misunderstanding or the child 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.

* 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 Guidance1999; Safeguarding Vulnerable Groups (Northern Ireland Order 2007)
* 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.

**Intimate Care Consent Form**

* **Please read our Intimate Care Policy which is available on our school website**
* Intimate care is any care which involves washing, dressing or carrying out an invasive procedure (such as cleaning up a pupil after they have soiled themselves). In most cases such care will involve cleaning for hygiene purposes as part of a staff member’s duty of care.
* St. Peter’’s P.S. is committed to ensuring all staff are responsible for the intimate care of children will undertake their duties in a professional manner at all times. St Peter’s recognises that there is a need to treat all children with respect when intimate care is given. Staff who provide intimate care are trained to do so under Child Protection procedures.
* The child will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each child to do as much for him/herself as he/she can. This may mean, for example, giving the child responsibility for washing themselves.
* Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded. The needs and wishes of children and parents will be taken into account whenever possible. If you wish to come into school and change your child yourself, you can indicate this wish below. However, in certain circumstances when a parent/carer cannot be contacted, the parent’s wishes may need to be waived, where failure to provide appropriate care would result in distress/discomfort for the child e.g. child sitting in soiled or wet clothes for a length of time.

I give permission for staff to provide intimate care for my child.

I do not wish staff to provide intimate care for my child. I wish to be contacted and provide the care myself

Signed: Parent/Carer

Child’s Name: Class:

|  |  |
| --- | --- |
| Contact Name | Contact Number |
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 In the event that I am unable or unlikely to be at the school within 10 minutes, I am aware that a member of staff will provide my child with wipes and alternative clothing and if necessary assist my child in the cleaning/changing process.

Signed ………………………………………………………………………………………………………