



INTIMATE CARE POLICY (Covid-19 Addendum)

Review Date: March 2022

Review Date: March 2025

Chair of Board of Governors	Date
Principal	Date

We care ~ We share ~ We learn

Record of Review/ Update

Review Date	Next Update Due
May 2021	May 2024
March 2022	March 2025

We care – We share – We learn

Our vision is to enable independent and happy pupils to acquire a capacity for lifelong learning

in

a Christian atmosphere that translates into daily life

by

promoting a learning environment which motivates creativity and achievement in an atmosphere of respect and responsibility

while

highlighting and nurturing strengths and celebrating successes

through

fostering successful, productive and enjoyable partnerships:

within school,

between home and school,

and

with the community in which our school belongs

3

We care ~ We share ~ We learn

Covid-19 Addendum –Intimate Care Policy

August 2020

Following the Government’s decision for some pupils to return to school from the 1st June 2020, the following amendments to the existing Toileting and Intimate Care Policy will be followed.

- Any member of staff engaging in intimate care with some pupils must wear PPE provided.
- If a member of staff has been identified as vulnerable and instructed to not provide personal/intimate care as a result of their risk assessment, they must not engage in an activity that would pose a threat. This includes nose-wiping, toileting, attending to nose bleeds etc.
- If a second member of staff is required, staff should contact the office. A second member of staff will then attend whilst adhering to social distancing guidelines. Soiled clothes should be double bagged and kept in a safe area at least 2m away from staff and pupils

Rationale

It is our intention to develop independence in each child, however we recognise that there will be times when help is required. Our Intimate Care Policy has been developed to safeguard children and staff. It forms part of the school's Pastoral Care Policy. The principles and procedures apply to everyone involved in the intimate care of children.

Children are generally more vulnerable than adults therefore, staff involved with any aspect of pastoral care need to be sensitive to their individual needs.

Intimate care may be regarded as any activity that is required to meet the personal needs of an individual child on a regular basis or during a one-off incident.

Such activities may include:

- toileting;
- feeding;
- oral care;
- washing;
- changing clothes;
- first aid and medical assistance; and
- supervision of a child involved in intimate self-care
- menstrual wellbeing and period dignity

Parents have a responsibility to advise the school of any known intimate care needs relating to their child.

Medical advice will be taken into consideration where appropriate (see Administration of Medicines Policy).

Principles of Intimate Care

The following are the fundamental principles of intimate care upon which our policy guidelines are based. Every child has the right to:

- be safe;
- personal privacy;
- be valued as an individual;
- be involved and consulted in their own intimate care to the best of their abilities;
- express their views on their own intimate care and to have such views taken into account;
- have levels of intimate care that are appropriate and consistent;
- be treated with dignity and respect.

School Responsibilities

All members of staff working with children are vetted by EA (Education Authority). This includes students and volunteers.

Only those members of staff who are familiar with the intimate care policy and other pastoral care policies of the school are involved in the intimate care of children.

Anticipated intimate care arrangements which are required on a regular basis are agreed between the school and parents, and when appropriate and possible, by the child.

In such cases consent forms are signed and stored in the child's record file.

Intimate care arrangements for any child who requires this support on a regular basis should be reviewed at least every six months.

The views of all relevant parties should be sought and considered to inform any future arrangements. Any amendments to arrangements should be recorded for all parties involved.

Parents of children starting Primary One are asked to give permission for staff to attend to the intimate care of their child (with particular reference to toilet accidents or illness) should need arise (see Appendix 1- Consent Form). Any requirement for such a need shall be recorded by staff in the agreed template (Appendix 2).

Only in an emergency would staff undertake any aspect of intimate care that has not been agreed by the parents. The act of intimate care would be reported to a member of staff and parents at the earliest possible time following the event.

If a staff member has concerns about a colleague's intimate care practice he or she must report it to the Designated Teacher for Child Protection, Mrs Shivers or the Deputy Designated Teacher for Child Protection, Mrs Scullion.

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. Young children and children with Special Educational Needs can be especially vulnerable. Staff involved with their intimate care need to be particularly sensitive to their individual needs. All incidents of Intimate Care should be documented using the Record of Intimate Care form (Appendix 2).

Members of 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 some forms of assistance can be open to misinterpretation.

Staff will endeavour to:

1. Involve the child in the intimate care

Try to encourage a child's independence as far as possible in his or her intimate care. Where a situation renders a child fully dependent, talk about what is going to be done and, where possible, give choices.

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

Care should not be carried out by a member of staff working alone with a child.

3. Make sure practice in intimate care is consistent

As a child may have multiple carers a consistent approach to care is essential. Effective communication between all parties ensures that the practice is consistent.

4. Be aware of your own limitations

Only carry out activities you understand and feel competent with. If in doubt, ask. Some procedures must only be carried out by members of staff who have been formally trained.

5. Promote positive self-esteem and body image

Confident, self-assured children who feel their bodies belong to them are less vulnerable to sexual abuse. The approach you take with 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 both efficient and relaxed.

6. If you have any concerns you must report them

If you observe any unusual markings, discolouration or swelling, report it immediately to the Designated Teacher or the Deputy Designated Teacher for Child Protection.

If a child is accidentally hurt during intimate care or misunderstands or misinterprets something, reassure the child, ensure their safety and report the incident to the DT or DDT. Report and record any unusual emotional or behavioural response by the child. A written record of concern must be kept in the child's personal file and shared with parent if appropriate (unless safeguarding issue.)

Hygiene.

All staff must be familiar with normal precautions for avoiding infection and should ensure the use of appropriate protective equipment when necessary, for example, protective, disposable latex/vinyl gloves.

Working with Children of the Opposite Sex

There is positive value in both male and female staff being involved with children.

Ideally, every child should have the choice for intimate care but the current ratio of female to male staff means that assistance will more often be given by a woman.

The intimate care of boys and girls can be carried out by a member of staff of the opposite sex with the following provisions:

- When intimate care is being carried out, all children have the right to dignity and privacy, ie. they should be appropriately covered, the door left slightly ajar;
- If the child appears to be distressed or uncomfortable when personal tasks are being carried out, the care should stop immediately. Try to ascertain why the child is distressed and provide reassurance;
- Report any concerns to the DT or DDT and make a written record;
- Parents must be informed about any concerns if appropriate.

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. Depending on their maturity and levels of stress children may communicate using different methods – words, signs, symbols, body movements etc. 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.

It is important to note that in addition to the information in the Intimate Care Policy, reference should also be made to the Child Protection and Pastoral Care Policy.

Menstrual Wellbeing and Period Dignity

- New Row Period Dignity key contact is Claire Shivers. Contact details have been submitted to CCEA.
- Period products are available from school office and sanitary bins in toilets.
- Allocated budget used to purchase products.
- Children are educated about menstrual wellbeing and period dignity through PDMU and RSE where necessary.
- As a school we follow the CCEA guidance for Menstrual Wellbeing and Period Guidance (Updated September 2022.)

Appendices:



- Consent Form Links
- Appendix 1 Record of Intimate Care FS
- Appendix 2 Parental Permission
- Appendix 3 Record of Intimate Care KS1 and 2

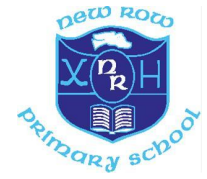


Our consent procedure is currently under review and at this time we are moving towards a paperless system in a bid to streamline the process. Links to consent forms are listed below:

<i>Whole School Consent Forms</i>
Start of year consent https://forms.office.com/r/jy4dZS22U1
Safeguarding Children Parental awareness: consent & receipt https://forms.office.com/r/ecYBqUtdES
Seesaw agreement https://forms.office.com/r/dSrKYWAY2t
Consent: intimate care for new year 1 intake https://forms.office.com/r/VEG0T5Dcye
Y6 & 7 end of day consent https://forms.office.com/r/pY1mDFHAhB

Appendix 1

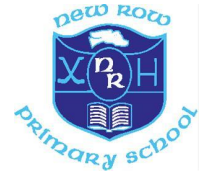
Record of Intimate Care FS



Date	Observations	CA Signature	Teacher Signature

Appendix 2:

Parental permission for Intimate Care



Name of child

Should it be necessary, I give permission for my child to receive intimate care (e.g. help with changing or following toileting).

I understand that staff will endeavour to encourage my child to be independent.

I understand that I will be informed discretely should the occasion arise.

Name of parent	
Signature	
Date	

Appendix 3:

Record of Intimate Care KS1/2



Name of child

Date

Time

Comments (including communication with parent as appropriate)

Staff involved

Signature(s)