

St Anne's Nursery & Primary School

Intimate Care Policy and Guidelines



**“Tall oaks from
Little acorns grow”**



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1.0 Introduction

This 'Intimate Care Policy and Guidelines' is based on the Northern Ireland Health Boards' Area Child Protection Committee's Regional Policy and Procedures April (2005).

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.

2.0 Definition

Intimate care may be defined as any activity required to meet the personal care needs of a 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.

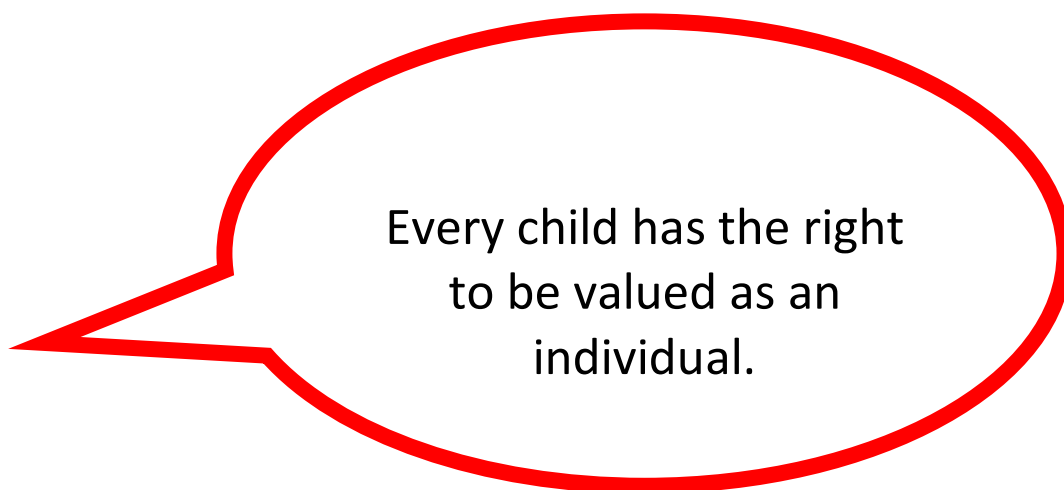
Intimate care can include:

- Feeding
- Oral care
- Washing
- Dressing/undressing
- Where a child has had a toileting or other accident and requires a change of clothing
- Toileting
- Menstrual Care
- Photographs
- Treatments such as enemas, suppositories, enteral feeds
- Catheter and stoma care
- Supervision of a child involved in intimate self-care.

3.0 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.
- No member of staff should take a photograph or make a video or other recording of a child during a change of clothing or an intimate care procedure. Recording devices (e.g. a camera, camcorder or mobile phone) must not be in the vicinity, when undertaking an intimate care procedure.
- 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 on 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.
- All staff assisting with a change of a child's clothing or undertaking the intimate care of a child must be familiar with, and implement, St Anne's 'Intimate Care Policy and Guidelines' and abide by the associated 'Child Protection Policy'.



4.0 Responsibilities

- All staff and volunteers working with children must be vetted by Access NI.
- Only members of staff employed by St Anne's should undertake the intimate care of children.

Occasional Intimate Care Needs



St Anne's Nursery Unit

Staff may be required to change a child's clothing if a child has had an accident while, for example, at the water tray or at the toilet. Parents are made aware of the possibility of this physical contact and must sign a consent form allowing it to take place. Only permanent members of the Nursery staff may change a child's clothing.

In order not to place the staff in a suspect position with regard to changing children, they should:

- Tell another member of staff that they are changing the child.
- Change the child in a reasonably open space, if possible where the other member of staff can see them.
- Be gentle with the child, especially if the child needs cleaned following a toileting accident.
- Try not to make the child feel bad about what is happening.
- Respect the child's dignity at all times.



St Anne's Primary School

If a child has a toileting or other accident, he/she may require a change of underwear and/or clothing. If this is the case, the following procedures should be followed:

- The member of staff should reassure the child.
- The member of staff should inform a colleague that he/she is assisting a child in a change of clothing.
- Where very young children are concerned, P1 and possibly P2, the member of staff may need to assist the child when changing clothing. The same procedures apply as for Nursery pupils.
- Where older children are concerned, the member of staff should not change the child's clothing. The child should be provided with the change of clothing and gently guided what to do.
- The child should change in a toilet cubicle.
- The member of staff should stay outside the toilet block.
- In all cases, the member of staff (or the older child) should place the wet or soiled clothing in a plastic bag and discreetly place it in the child's schoolbag or in a suitable place for sending home.
- A note should be sent home to parents / carers, explaining the need for the clothing change. (See note at end of this policy.)

On-going Intimate Care Needs (Special Needs)

- All relevant staff must be trained in the specific types of intimate care that they are required to carry out, and fully understand the Intimate Care Policy and Guidelines within the context of their work. Specific training is carried out by Mitchell House.

- Intimate care arrangements must be agreed between the school, parents/carers and the child (if appropriate).
- Intimate care arrangements must be recorded and consent forms signed by the parents/carers and the child (if appropriate).
- Staff should not undertake any aspect of intimate care that has not been agreed between the school, parents/carers and the child (if appropriate).
- St Anne's makes provision for emergencies i.e. if a staff member is absent. An alternative member of staff is available to undertake specific intimate care tasks, by agreement with the parents/carers and the child (if appropriate).
- Intimate care arrangements, and any changes to these, are discussed with all relevant parties, including the parents/carers and the child (if appropriate).
- If a staff member has concerns about a colleague's intimate care practice he/she must report this to the designated teacher, who will instigate Child Protection procedures.



5.0 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 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.

- Staff also need to be aware that some adults could use intimate care as an opportunity to abuse children. It is important to bear in mind that some care task/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.

- Encourage the child's independence as far as possible in his/her intimate care.
- Where the child is fully dependent, talk with him/her about what is going to be done and give him/her a 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

- 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-to-one intimate care of a child is appropriate, unless the activity requires two persons for the greater comfort/safety of the child or the child prefers two persons.

Make sure that practice in intimate care is consistent.

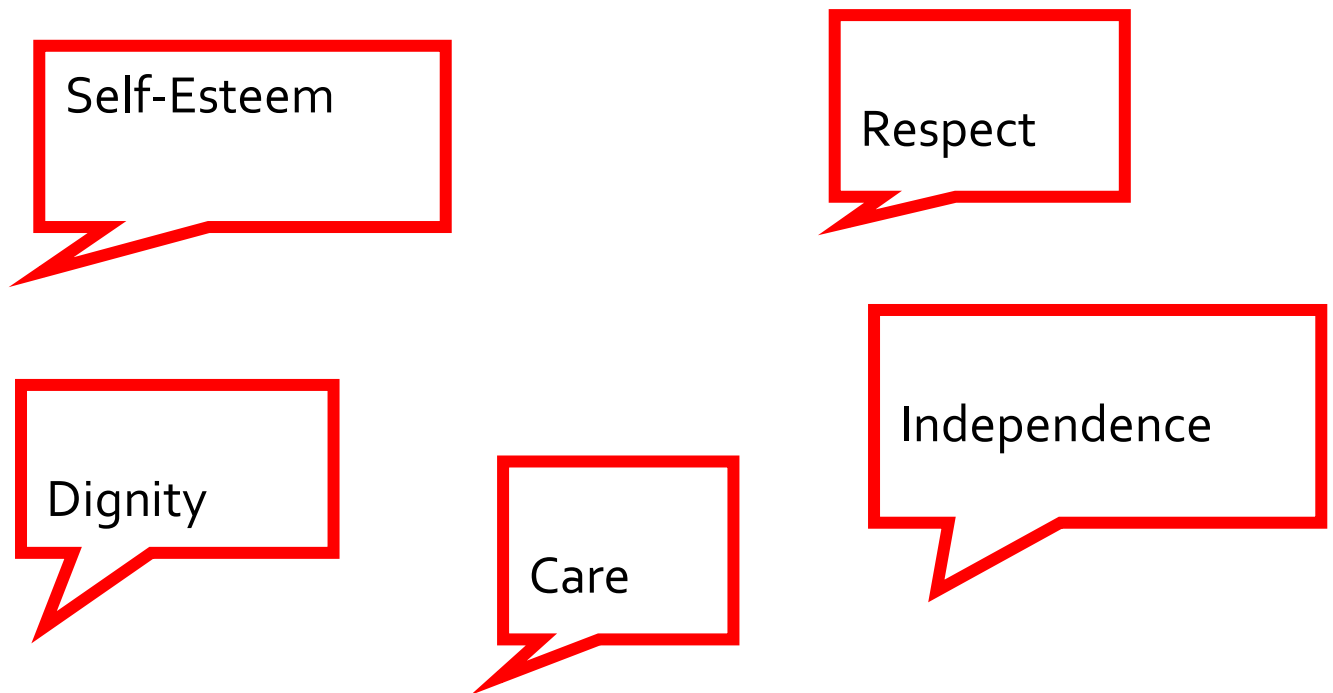
- As a child can have multiple carers, a consistent approach to care is essential. Effective communication between parents/ carers and the school ensures that practice is consistent.

Staff should be aware of their limitations.

- Only carry out care activities which you understand and feel competent and confident to carry out. If in doubt, ask.
- Some procedures must be carried out only by staff who have been formally trained and assessed e.g. enteral feeding, rectal diazepam

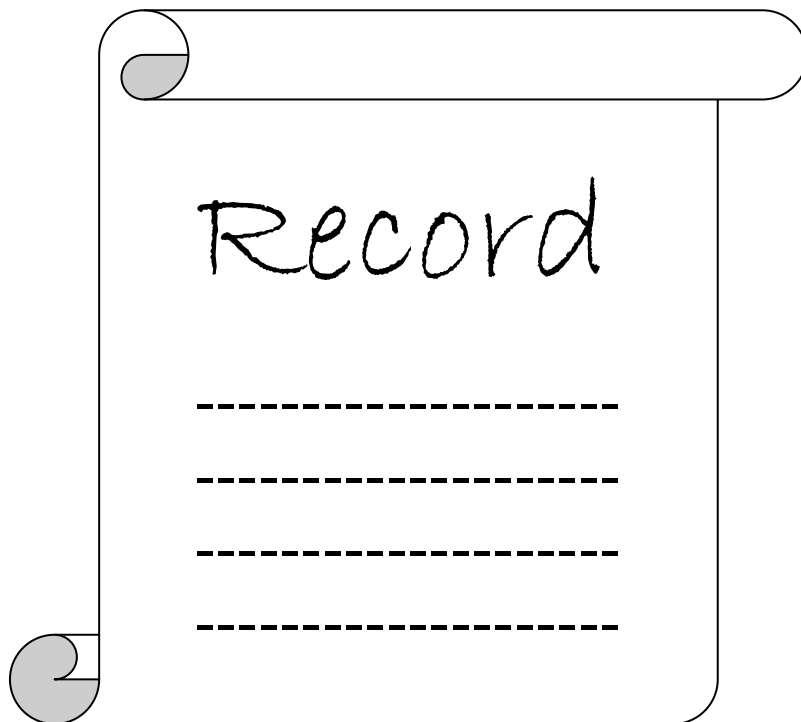
Promote positive self-esteem and body image.

- 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 should be relaxed and comfortable.



If you have any concerns, you must report them.

- If you observe any unusual markings, discolorations or swelling, including in the genital area, report it immediately to the 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 the 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 file. The concerns should be reported immediately to the designated teacher, who should also keep a record on file. It is important to follow St Anne's Child Protection reporting and recording procedures. Parents/carers must be informed about concerns, where appropriate.



6.0 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 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:

- Supervision, and liaising with families.
- Co-ordinating of and contribution to a child's review.

- Meeting the developmental, emotional and recreational needs of the children.
- Escorting the children between sites, on outings and to clinics, unless intimate care is needed.

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 speak on the child's behalf.
- It may be possible to determine a child's wishes by observation of their reactions to the intimate care they receive.
- We 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 their professional code of conduct in conjunction with St Anne's policy and procedures.
- Staff who are not governed by a professional code of conduct must follow policy and procedures in operation within St Anne's, and direction and agreement must be provided by the SENCo, the designated teacher and the 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 should be closed or screens/curtains should be put in place.
- If the child appears distressed or uncomfortable when personal care tasks are being carried out, the care should stop immediately. The member of staff should try to ascertain why the child is distressed and provide reassurance.
- Report concerns to the Designated Teacher and make a written record.
- Parents/carers must be informed about concerns, where appropriate.

Covid-19 – Addendum (September 2020)

Should any child require any form of intimate care, they will be assisted by a member of staff wearing full PPE equipment. This will include:

- visor/mask

- gloves
- apron



7.0 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:

- Ascertain how the child communicates e.g. consult with child, parent/carer and, if appropriate, communication needs must be recorded (please refer to Appendix 1, Communication Proforma for Intimate Care: How I Communicate).
- If further information is required, please consult with the child's Speech and Language Therapist.
- 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.

For further information, 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
St Anne's Child Protection Policy

Appendix 1

Communication Pro-forma for Intimate Care **(How I Communicate)**

Name: _____

Date: _____

I communicate using words / signs / communication book /
communication aid / body movements.

I indicate my likes / preferences by _____

I indicate my dislikes by _____

I show I am happy by _____ and
unhappy by _____

(If appropriate please complete the following)

When I need to go to the toilet I _____

When I need changed I _____

Additional information _____

Speech and Language Therapist _____

Occupational Therapist _____
Key worker/s _____
Contact Number/s _____
Parent/Carer signature _____

Appendix 2



St Anne's Primary School/Nursery Unit

Date: _____

Dear Mr / Mrs _____,

Your child _____ needed a change of clothing
today because:

Signed _____

I should be grateful if you could wash and return the items, at your
earliest convenience.

Thank you.

Signed: _____