

St Bernard's Primary School and Nursery Unit Intimate Care Policy



August 2023
Version 1.7

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

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.

Responsibility of Parents

Parents/ Guardians should ensure that their child is toilet trained upon commencement of the new school term, commencing Nursery and commencing P1 in particular.

In exceptional circumstances a child may have a medical diagnosis. This must be supported with a Doctor's letter (stating that Intimate Care is required) and a Statement of Special Education Needs. St. Bernard's can then provide changing facilities. In this case a one-to-one SEN Assistant will be responsible for providing Intimate Care for your child. This is the only occasion where regular, intimate care can be provided. When Intimate Care takes place, arrangements will be made to ensure that there is always a member of staff nearby.

Safeguarding and Child Protection procedures

For reasons of Safeguarding and Child Protection, it is expected that all other pupils are fully toilet trained. (With the exception of pupils with a Statement of Special Educational Needs)

If a child is not fully toilet trained, without a medical diagnosis, it is the responsibility of the parent/guardian to inform school.

The following procedure will be implemented to support the child and parents/guardians.

A meeting will be organised with either the class teacher.

The outcome of this meeting should provide parents/guardians and school with agreed practical strategies. These will include:

- A time frame (*This will be reviewed on a weekly basis with the class teacher, SENCO or member of Senior Management.*)
- Provision of resources, such as visuals which can be used at home to support the toilet training process
- A list of outside agencies which could provide further support (*Such as The Hubb, GP, Health Visitor*)

With the support from parents/guardians and school, we aim to enable your son/daughter to become fully toilet trained.

In the case where this plan lapses without success, further procedures will be applied.

These may include:

- The child's start date being deferred
- A reduced day being implemented
- Social Services being informed in line with our Safeguarding Policy

The school cannot provide any regular form of changing or intimate care for pupils who are not toilet trained (With the exception of Statemented children who have a one-to-one assistant and a supporting letter from a Doctor)

School Responsibilities on Intimate Care with Statemented Children

All members of staff working with children are vetted by Access NI. This includes students and volunteers who would be unsupervised while with a child. Students/Volunteers will NOT be involved in intimate care of a child. 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 a one-to-one assistant will be responsible for providing Intimate Care to children with a Statement of Special Educational Needs. When Intimate Care takes place, arrangements will be made to ensure that there is always a member of staff nearby. Consent forms are signed on behalf of child by parents/guardian 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 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 Nursery and Primary One are asked to give permission for staff to attend to the intimate care of their child on the occasion of toilet accidents or illness only. If a member of staff can talk the child through changing themselves they will do so. If not a parent will be called to come and change the child. (see Appendix A)

Swimming

Where possible children from P5 up need to dress/undress themselves when going to swimming as part of the school curriculum.

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, Mr S. Kavanagh or the Deputy Designated Teacher for Child Protection, Mrs B. Craig.

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 B).

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.

In some instances, a lot of care is 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.

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 their 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 concerns must be made available to parents and kept in the child's personal file.

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, i.e. they should be appropriately covered, screen/curtains put in place;
- 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.
- arrangements will be made to ensure that there is always a member of staff nearby.

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. (Appendix C)

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 Policies.

St Bernard's Primary School

June 2023

Appendix A

St Bernard's Primary School and Nursery Unit



Parental permission for Intimate Care

Should it be necessary, I give permission for 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.

Signed

Adult with parental responsibility for

Appendix B

St Bernard's Primary School and Nursery Unit



Record of Intimate Care

Name/class of child	Date	Time	Comments	Staff involved Signature

Appendix C

St Bernard's Primary School and Nursery Unit



Communication for Intimate Care

How to 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 _____