INTIMATE CARE POLICY

Safeguarding Team

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Gilnahirk Primary School
Intimate Care Policy

Rationale

It is our intention to develop independence in every child. Gilnahirk Primary encourages all children to be independent in respect of their intimate care and toileting needs. However, there will be occasions when help is required. Our intimate care policy has been developed to safeguard children and staff. It is one of a range of specific policies that contribute to our pastoral care policy. The principles and procedures apply to everyone involved in the intimate care of children. Children are generally more vulnerable than adults and staff involved with any aspect of pastoral care need to be sensitive to their individual needs.

Intimate care may be defined as any activity that is required to meet the personal needs of an individual child on a regular basis (due to medical needs or special educational needs) or during a one-off incident. Such activities can include:

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

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

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;
- ✓ 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;
- ✓ all children have the right to be involved and consulted in their own intimate care to the best of their abilities;
- ✓ all children have the right to express their views on their own intimate care and to have such views taken into account; and
- ✓ every child has the right to have levels of intimate care that are appropriate and consistent.

School Responsibilities

All staff working with children are vetted by E.A. 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.

Meeting the individual needs of a child

Where anticipated, intimate care arrangements are agreed between the school and parents and, if appropriate, by the child. Consent forms are signed by the parent and stored in the child's file. Only in an emergency would staff undertake any aspect of intimate care that has not been agreed by parents and school. Parents would then be contacted immediately. Regular intimate care will only be provided in the event of a certifiable medical condition that requires the child to be provided with such care. Intimate care arrangements for any child who requires this support on a regular basis (due to a certifiable medical condition) should be reviewed at least six monthly. The views of all relevant parties should be sought and considered to inform future arrangements.

Meeting the needs of a child during a one-off incident

Should a one-off incident occur due to wetting and/or soiling or being physically sick, staff will provide the necessary intimate care. However, if a severe one-off incident occurs the child's parents will be contacted immediately and asked to come to school to provide the necessary care for their child. If the child's parents cannot be contacted staff will then provide the necessary intimate care. School will continue to try and make contact with the parents.

If a staff member has concerns about a colleague's intimate care practice he or she must report this to the designated teacher for child protection.

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. 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 that some forms of assistance can be open to misinterpretation. Adhering to the following guidelines of good practice should safeguard children and staff.

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 give choices where possible. Check your practice by asking the child or parent about any preferences while carrying out the intimate care.

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

Intimate care will never be provided by an individual member of staff. Staff members will always ensure that, where intimate care is deemed appropriate and necessary, two members of staff will be present during the provision of intimate care. At all times, the child's dignity and respect will be of paramount importance.

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 practice is consistent.

4. Be aware of your own limitations
Only carry out activities you understand and feel competent with. If in doubt, ASK (DT, DDT-Principal or VP). Some procedures must only be carried out by members of staff who have been formally trained and assessed

5. 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 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 DT or DDT. If a child is accidentally hurt during the intimate care or misunderstands or misinterprets something, reassure the child, ensure their safety and report the incident immediately 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 and kept in the child's personal file.

Procedure for Intimate Care

If a child needs to be cleaned, staff will make sure that:

- Protective gloves are worn.
- The procedure is discussed in a friendly and reassuring way with the child throughout the process.
- The child is encouraged to care for him/herself as far as possible.
- Privacy is given.
- All spills of vomit, blood or excrement are wiped up and flushed down the toilet.
- Soiled clothing is put in a plastic bag, unwashed and sent home with the child.

This policy should be read in conjunction with all of our Pastoral Care policies, which can be obtained from the school office or viewed on the school website: www.gilnahirkps.org