

Rasharkin Primary School



Intimate Care Policy

INTRODUCTION

This policy has been written with reference to the ACPC Intimate Care Policy and Guidelines Regarding Children (April 2005), which have been developed to safeguard children and staff, and should be read in conjunction with. 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.

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.

In Rasharkin Primary School intimate care most commonly includes, help with washing, dressing/undressing, toileting, photographs and supervision of a child involved in intimate self-care. (It can also include feeding, oral care, menstrual care, treatments such as enemas, suppositories, enteral feeds, catheter and stoma care.). To help preserve the dignity of the child our policy is always to encourage the child to be as independent as possible, e.g. passing clean clothes to the child rather than actually dressing the child.

PRINCIPLES OF INTIMATE CARE

The following are the fundamental principles upon which this 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.

ROLES AND RESPONSIBILITIES

- It is our policy in school that all staff working with children must be vetted. This includes students on work placement and volunteers. Vetting includes, Access NI checks, pre-employment checks and two independent references.
- Only staff identified by the principal should undertake the intimate care of children.

- All staff undertaking the intimate care of children must be familiar with, and understand Rasharkin Primary School's Intimate Care Policy together with associated policies and procedures
- 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). Staff should not undertake any aspect of intimate care that has not been agreed between the school, parents / carers and child (if appropriate).
- Intimate care arrangements must be recorded in SIMS, including consent forms signed by the parents / carers and child (if appropriate). For children requiring additional Intimate Care this may be reflected in an individual plan, agreed with all parties.
- Provisions should also be made for emergencies i.e. a staff member on sick leave. Additional trained staff should be available to undertake specific intimate care tasks. This will not be assumed.
- Simple intimate care needs, e.g. a child hasn't got to the toilet in time and needs assistance with changing into dry clothes are recorded when the child enters the school. Parents can change this at any time by contacting the office.
- More complex intimate care arrangements should be reviewed at 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 teacher, without delay.

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 an 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.

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 / school 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, 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 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 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 your designated manager / 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 Child Protections record, in line with Rasharkin Primary School's Safeguarding Policy. Parents / carers must be informed about concerns.

WORKING WITH CHILDREN OF THE OPPOSITE SEX

Principles:

- There is a positive value in both male and female staff being involved with
- n:\policies and procedures\rps policies\SAFEGAURDING\intimate-care-policy- oct 2022 rps.docx

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 far 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:

- Key working 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 act as advocates.

It may be possible to determine a child's wishes by observation of their reactions to the intimate care they receive. 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 the school's policy and procedures.
- 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 Manager / 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.

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 should be recorded (e.g. ACPC Intimate Care Policy and Guidelines Regarding Children (April 2005), Appendix 1)
- 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.

RASHARKIN PRIMARY SCHOOL INTIMATE CARE PROCEDURE FOR CHANGE OF CLOTHING

If a child requires a change of clothing due to, e.g. wetting / soiling or after being sick, staff will follow the procedure below:

1. If possible two adults will be present
2. Children will be encouraged to change as many items of clothing independently, as possible
3. An individual member of staff will not enter a toilet cubicle with a child
4. Parents will be informed on the same day as the incident has occurred, either by speaking directly with the parent or a note home
5. A 'Change of Clothes' record will be kept in Yr1 /2 and any other classrooms as individual pupil cohort would require and should be completed (see appendix 1).

The school maintains a supply of fresh clean clothes for use in emergencies and will act sensitively to minimise embarrassment for the pupil.

MENSTRUAL WELL-BEING AND PERIOD DIGNITY

Period Dignity refers to the accessibility and availability of essential care needed to support a period, in conjunction with the removal of stigma around periods. Education is a key factor in breaking the stigma surrounding periods and promoting respect, understanding and open discussions about what people may experience when menstruating.

Period Poverty refers to poor menstrual knowledge and/or access to period products. Feedback collated from CCEA's online Period Poverty surveys (June 2021) forms the basis of the project and falls under three main themes known as the **Toxic Trio**:

- the cost of period products
- accessibility of period products; and
- shame, stigma, and taboo

The Period Dignity Scheme aims to promote period dignity and tackle period poverty, helping learners who menstruate to stay in school and reach their full potential.

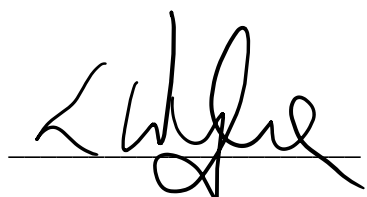
The teaching of Period Dignity and Menstrual Wellbeing supports the school's ethos and reflects moral and religious principles of parents/carers and school management by promoting not only the intellectual, but also the moral, personal, and social development of the child. The teaching of Period Dignity is inclusive and focuses on equality, health and hygiene, self-esteem, respect and understanding. It complements Rasharkin Primary School's ethos through encouraging the provision of a safe and secure learning environment to assist **all** children, including menstruating pupils, to reach their full potential.

Through the education of Period Dignity and Menstrual Wellbeing Rasharkin Primary School aims to;

- inform pupils on the facts of menstruation
- break the stigma/taboo surrounding periods and promote respect and understanding
- address challenges such as pain, anxiety, fear, embarrassment, and myths
- inform pupils on menstrual wellness (physical and emotional)
- allow open discussions about what people may experience when menstruating.
- support good health and prevent young people wearing the wrong product, substituting for a poor-quality product or toilet roll, or wearing a product that is no longer safe.
- encourage the uptake of free period products in school when needed
- help keep young people in school and increase concentration in class through not having to worry about lack of period products or leaking
- promote confidence to participate in sports and other extra-curricular activities when menstruating by having access to products
- build general self-esteem and self-confidence of menstruating pupils
- provide advice/care for pupils with sensitive period related issues.

Pupils in P6/7 will be informed of the availability and location of free period products (towels) in Rasharkin Primary School. They will also be reminded that they can talk to Mrs. Henry, Mrs. Calderwood or Mrs. Howe if they have any concerns.

Signed:

 (Chair of Board of Governors)

26/10/22 (Date)

Appendix 1

Change of Clothes Record

Sample layout of book

Date	Time	Child's Name	Reason for Change	Adults Present / Assisting (please indicate)

Book to kept in Year 1 /2 and other classrooms as deemed necessary and completed each time child is changed. Any concerns must be passed on to the Designated Teacher.