



INTIMATE CARE POLICY

Belfast High School

Date: February 2023

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Ratified by: Board of Governors

Responsibility: Board of Governors

Author: Vice Principal

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INTRODUCTION

At Belfast High School we respect and value all pupils and are committed to providing a caring and safe environment so that all can learn in a relaxed and secure atmosphere.

This Intimate Care Policy has been developed to safeguard children and staff. It follows guidance issues by the Department of Education (DE), the Education Authority and the Safeguarding Board for Northern Ireland (SBNI). This policy applies to everyone involved in the intimate care of pupils at Belfast High School.

Children with disabilities 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 pupil. Parent(s)/carer(s) 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.

Parents should refer all information and advice regarding intimate care needs to the Special Education Needs Coordinator (SENCO). Information should also be sought in partnership from transfer primary schools.

Intimate care may include:

- Feeding
- Oral care
- Washing
- Dressing/undressing
- Toileting
- Menstrual Hygiene
- Photographs
- Treatments such as enemas, suppositories, enteral feeds
- Catheter and stoma care
- Supervision of a child involved in intimate self-care

Each pupil needing intimate care will have an Intimate Care Plan (see Appendix 2) that is written in cooperation with parent(s)/carer(s) and the school.

The Intimate Care Plan will follow an initial Health & Safety and Risk Assessment that will be carried out by the school in partnership with relevant agencies and other professionals, for example occupational therapists, as appropriate (see Appendix 2).

PRINCIPLES OF INTIMATE CARE

Using guidance from DE, EA and SBNI, the following are the fundamental principles upon which this policy is 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.

SCHOOL RESPONSIBILITIES

All staff working with children must be vetted by the school. This includes students on work placement and volunteers. Vetting includes:

- Access NI checks
- Pre-employment checks and two references

Only named staff identified by the school should undertake the intimate care of pupils. Staff undertaking the intimate care of children must be familiar with, and understand the Intimate Care Policy and Guidelines together with associated Guidance, Policies and Procedures. Staff undertaking intimate care will work with the SENCO in drafting each Intimate Care Plan for students.

All staff must be trained in the specific types of intimate care that they carry out.

Intimate Care Plans will be written in partnership between the school, parent(s)/carer(s) and child (if appropriate) and must be saved in the pupil's personal file. When compiling the Intimate Care Plan, discussion between the child, parents/carers and the school will include arrangements for menstrual hygiene. Period products will be available in the hygiene room. The welfare, dignity and privacy of the child remain paramount when creating the plan. The dignity and Consent forms (see Appendix 1) must be signed by the parent(s)/carer(s) and the child (if appropriate).

Staff should not undertake any aspect of intimate care that has not been agreed between the school and parent(s)/carer(s) and child. The school will make contingencies to ensure the effective delivery of an Intimate Care Plan if a staff member is on sick leave. Additional trained staff will be available to undertake specific intimate care tasks.

Intimate care arrangements will be reviewed at six monthly intervals. The views of all relevant parties, including the child (if appropriate), will be sought and considered to inform future arrangements. Any policy changes will be presented to the Board of Governors.

If a staff member has concerns about a colleague's intimate care practice they must report this to the Designated, or a Deputy Designated Teacher.

PROMOTING GOOD PRACTICE

This Policy outlines the importance of each pupil being involved in the drafting of their intimate care plan. Carers must try to encourage a child's independence as far as possible in his/her intimate care. Where the child is fully dependent, carers must talk/communicate with them about what is going to be done and give them choice where possible.

Each pupil must complete a "How I Communicate" form (see Appendix 4), overseen by the SENCO. Carers must check their practice by asking the child/parent any likes/dislikes while carrying out intimate care and obtain consent. Treat every pupil with dignity and respect and ensure privacy appropriate to the child's age and situation.

This policy supports the practice of providing one-to-one intimate care of a pupil alone, unless the activity requires two persons for the greater comfort /safety of the pupil or the child prefers 2 persons.

Practice in intimate care must be consistent, especially if there may be more than one carer. If a pupil has multiple carers a consistent approach to care is essential. Effective communication between parents/carers/school ensures practice is consistent.

Staff should carry out care activities they understand and feel competent and confident to carry out. If in doubt they must ask for further training and/or guidance from School Leadership.

Some procedures must only be carried out by staff who have been formally trained and assessed eg enteral feeding, rectal diazepam.

Confident, self-assured children who feel their body belongs to them are less vulnerable to sexual abuse. The approach taken to intimate care can convey lots of messages to a child about their body worth. The school's and each individual carer's attitude to a child's intimate care is important. Keeping in mind the child's age, routine care can be relaxed, enjoyable and fun.

Safeguarding and Child Protection

If any member of staff, parent/carer or pupil has any concerns, they must report them. This can be reported to the SENCO or if of a safeguarding nature, to the Designated Teacher or one of the Deputy Designated Teachers. If any unusual markings, discolourations or swelling, including the genital area, are present, report immediately to a Designated Teacher. If during the intimate care of a pupil, they are accidentally hurt, or the pupil appears to be sexually aroused by care 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 medical notes and personal file.

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 guidelines set out below, are written in the knowledge that the current ratio of female to male staff means it may be difficult to offer the choice of same sex carer to male children. Male and female staff can be involved with children of either sex in:

- (a) Classroom Assistance/Keyworking and liaising with families.
- (b) Co-ordinating of and contribution to a child's review.
- (c) Meeting the developmental, emotional and recreational needs of the pupil.
- (d) Escorting the pupil between lessons, on outings and to the medial room 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 pupil is able to make an informed choice on these issues, the child's parents will be given the choice to make. It may be possible to determine a pupil's wishes by observation of their reactions to the intimate care they receive. Staff involved in the delivery of Intimate Care must 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:

- (a) The delivery of intimate care by professionally qualified staff will be governed by their professional code of conduct in conjunction with school policy and procedures.
- (b) Staff who are not governed by a professional code of conduct must follow policy and procedures in operation within the school, and direction and agreement must be provided by SENCO and School Leadership.
- (c) When intimate care is being carried out, all pupils have the right to dignity and privacy ie they should be appropriately covered, the door closed or screens/curtains put in place.
- (d) If the pupil appears distressed or uncomfortable when intimate care tasks are being carried out, the care should stop immediately. Carers must ascertain why the child is distressed and provide reassurance.
- (e) Report concerns to a Designated Teacher.
- (f) Parent(s)/carer(s) must be informed about concerns.

RESTRAINT

There may be occasions where it is necessary for staff to restrain pupils physically to prevent them from inflicting damage on either themselves, others or property. In such cases trained staff should use the minimum contact necessary for the minimum length of time required for the pupil to regain self-control using accredited training techniques. In all cases of restraint, each incident must be documented and reported. Staff must be fully aware of and adhere to all school's policies on the use of physical contact to control or restrain and positive handling.

Under no circumstances is it permissible to use physical force as a form of punishment, to modify behaviour, or to make a pupil comply with an instruction. Physical force of this nature is deemed unacceptable by the school.

FIRST AID AND INTIMATE CARE

Belfast High School has many trained first-aiders and pupils are aware of who their nearest trained first aider is. Staff who administer first aid should ensure, wherever possible, that another adult or other pupil are present. The pupil's dignity must always be considered and where contact of a more intimate nature is required (e.g. assisting with toileting or the removal of wet/soiled clothing), another member of staff should be in the vicinity and must be made aware of the task being undertaken.

Regular requirements of an intimate nature should be planned for. For conditions known to school, administered first aid procedures should be in line with agreed Intimate Care Plan.

COMMUNICATION WITH CHILDREN

It is the responsibility of all staff caring for a pupil 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(s)/ carer (s) and, if appropriate, communication needs must be recorded (please see Appendix 4). If further information is required please consult with the child's Speech and Language Therapist, if appropriate.

This policy encourages carers involved in intimate care to:

- 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.

LINKED DOCUMENTS

This policy has been written following guidance issued by the DE and other agencies:

<https://ccea.org.uk/learning-resources/period-dignity> (2022)
Safeguarding and Child Protection in Schools, DE Circular 2017/04
Safeguarding Vulnerable Groups (Northern Ireland) Order (2007)
Area Child Protection Committee Child Protection Procedures (2005)
Intimate Care Policy and Guidelines Regarding Children

Review

This policy will be kept under review by the Board of Governors, in line with the School's Policy Review Schedule.

Belfast High School
CONSENT FOR INTIMATE CARE

Child:	
DOB:	
Address:	
Parent/Carer:	
<p>I / we give permission for the assistance detailed to be provided to my / our child and will advise the Principal / SENCO of any change that may affect this provision.</p> <p>Signed:</p>	
<p>I, the child, give permission for the assistance detailed to be provided to me.</p> <p>Signed:</p>	

Belfast High School
INTIMATE CARE PLAN

Pupil:	DOB:
Medical Condition:	
Assistance:	
Arrangements for menstrual hygiene:	
Timetable:	
Persons assisting:	
Alternative arrangements:	
Location / Equipment:	

Signed	Designation	Date
Parent/Carer		
Pupil		
Assistant/s		
Principal		

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Intimate Care Plan “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:
I show I am 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: _____

Classroom Assistant/Key worker/s: _____

Parent/Carer Signature: _____

Contact Number/s: _____