

St. Mary's Primary School, Killyleagh



“Learning Today for a Better Tomorrow”

Intimate Care Policy Addendum Covid-19

Policy reviewed by staff – Aug 2020

Policy presented to parents for consultation – Oct 2020

Policy reviewed and ratified by Governors- Nov 2020

Signature of Chair _____

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 any intimate care needs of their child, and staff have a responsibility to work in partnership with children and parents.

We will continue to meet the needs of those children who require intimate care as outlined in our policy but with a few adjustments due to Covid - 19 to ensure that the health and safety of the child and staff member. Intimate Care may need to be provided if the child has been involved in an accident, has toileting issues or has become unwell.

Consent for the provision of intimate care was sought this year using Microsoft Forms.

During intimate care **PPE must be worn**. Please see guidance below (DE Restart Guidance 13.8.20). We will ensure this is carried out in a sensitive way. All staff have had awareness training on putting on and removal of PPE.

PPE in the following situations means:

- fluid-resistant surgical face masks;
- disposable gloves;
- disposable plastic aprons; and
- eye protection (for example a face visor).

Where PPE is recommended, this means that:

- a facemask must be worn if a distance of 2m cannot be maintained from someone with symptoms of COVID-19 (**symptomatic children should not be in school**);
- if contact is necessary, gloves, an apron and a facemask must be worn; and
- if a risk assessment determines that there is a risk of fluids entering the eye (e.g. from coughing, spitting or vomiting), eye protection should also be worn.

Face masks:

- MUST cover both nose and mouth;
- MUST be changed when they become moist or damaged;
- MUST be worn once and then discarded – hands must be cleaned after disposal;
- MUST NOT be allowed to dangle around the neck; and
- MUST NOT be touched once put on, except when carefully removed before disposal.

PPE should be disposed of in a double bag. Soiled clothes should also be double bagged and kept at least 2m away from pupils and staff.

RATIONALE

While we work towards ensuring that our children become independent, we acknowledge that there are times when any child may need support and assistance with intimate care needs, and that there are some children for whom this is an ongoing requirement. We have drafted this policy (in line with recommendation from <https://www.health-ni.gov.uk/sites/default/files/publications/dhssps/intimate-care-policy.pdf>) to ensure that:

- all staff adhere to recognised good practice;
- all children feel safe and cared for;
- parents know that their children's intimate care needs are being met.

Intimate care is any activity that needs to be engaged in by an adult to ensure that a child's intimate care needs are addressed. This could be a one off e.g. after an accident; or could be daily e.g. a child with medical or physical needs. The most common activities in which staff may be engaged are toileting activities, including washing and changing clothes when necessary, and assisting children with changing for PE lessons, administering medication.

St Mary's works in partnership with parents to educate their children. We ask that parents make us aware of any intimate care needs their children may have, and that they discuss with us any specific requirements or strategies that they feel are appropriate.

PRINCIPLES

In St Mary's we feel that every child has the right to:

- be safe and cared for;
- dignity and respect, including the right to privacy;
- be involved in their own intimate care according to their personal capabilities, including expressing personal views and being listened to;
- having their intimate care needs met in an appropriate way.

We feel that every adult employee has the right to:

- appropriate training and information regarding children with intimate care needs for whom they will provide care;
- be safeguarded from accusations relating to intimate care practices.

RESPONSIBILITIES

Board of Governors

The BOG will ensure that an appropriate policy is drawn up and approved, and will maintain an overview of its implementation, without receiving details such as names of children or parents without express prior approval by parents.

Teaching Staff

All staff are vetted by EA in line with DENI Circular 2006/09, including any students, volunteers, substitute teachers and peripatetic staff.

A child's intimate care needs will be taken care of by an adult with whom the child is familiar and who is fully aware of the school policy. Where a child has ongoing intimate care needs

there will be an agreement drawn up between school and parents about the details of the care to be given, with the child being aware of what has been agreed - and in some cases with the child's involvement in the planned actions. Intimate care plans for children with ongoing needs should be reviewed at least twice a year to allow for changes for children who have acquired a greater degree of independence or whose care needs may have changed.

Parents of P1 children are asked to give their consent for staff to help with the intimate care needs of their children should the necessity arise eg toileting accident.

In the event of an emergency staff may assist with an intimate care need where permission has not been given by parents - in the interests of the health, wellbeing and dignity of the child. Parents and the designated teacher would be notified as soon as possible.

All staff have the responsibility to report to the designated teacher any concerns they may have about the practices of other teachers with regard to children's intimate care needs.

Parents

Parents are asked to do the following:

- notify the school of any intimate care needs their children may have, either occasional or daily needs;
- for children with continuous needs - to work with school staff on a plan for their individual child's needs and to ensure that the school has a change of clothing for their child;
- Agree with staff appropriate terminology for parts of the body and bodily functions.
- for all parents - to sign a consent form allowing staff to provide intimate care needs when necessary;
- occasionally parents may be asked to provide an item of children's clothing they no longer use - clothing to change children in to in the event of an accident;
- be familiar with the school's policy.

GUIDELINES

The following guidelines should be followed to maximise appropriate and dignified care for children and to minimise accusations of inappropriate practice against staff:

- Children are at all times to be treated with dignity and respect, with staff being aware of the sensitivities around supporting children with intimate care needs.
- Children should be involved as much as possible in their own intimate care needs. Talk to them about what is happening and allow them to make decisions and to do things for themselves, where appropriate.
- Care should be provided at agreed times, at the child's request or in response to an agreed signal. Staff should make themselves familiar with the child's manner of communication, whether verbal, sign or eye contact.
- Privacy is paramount - a child should never feel embarrassed about others knowing about his/her intimate care needs.

- It is important to be consistent so that a child will always know what to expect. Where there have been changes to a plan due to changing needs or a child's greater independence the child must know in advance of these changes.
- Appropriate terminology for parts of the body and bodily functions should be clarified between the child, parents, and his/her assistant.
- Try to be relaxed and efficient so that the child will not feel that they are a burden, or will not feel embarrassed. Be friendly, and allow the child to have as positive an experience as possible.
- If anything, unusual is noted during an intimate care routine it should be reported to the designated teacher eg bruising, unusual behaviour by child.
- Keep a confidential record of each instance where action has been required which is stored in the child's school file. Information should not be disclosed or discussed with any adults other than those with responsibility for the child's personal care, and should not be referred to in the presence of other children
- Staff need to be aware of hygiene issues, and should wear disposable latex gloves when necessary.
- When intimate care is being carried out privacy can be guaranteed by doors being closed, the child being appropriately covered, or screens or curtains being put in place.
- Try to reassure a child who becomes distressed, and stop any activity that is causing distress until the child has calmed down. Reassure the child that what is happening is going to make them feel better.
- If there any concerns about the child then parents should be informed.

PE

Children will change for PE classes in accordance with recommendations. P1 and P2 children will be supervised when changing and boys and girls will change in the same room. Any assistance required will be given when children have difficulties, but it is anticipated that children will generally be able to manage the process unaided. Children may be assisted to eg tie shoe laces or put on jogging bottoms or tops when necessary, but as an exception rather than a rule.

From P3 on children will change in separate rooms, and assistance will only be given when a child is having real difficulty and asks for help.

Children with special needs eg medical or learning needs, will be assisted as necessary to change for PE. From P3 onwards this assistance will be provided privately, in keeping with the need for dignity, in a curtained off area or in a different room.

INVASIVE INTIMATE CARE PROCEDURES:

In specific situations, where more personal intimate care procedures are required, an appropriate **CAREPLAN** will need to be drawn up in advance, in consultation with medical staff, parents/guardians and school staff. This **CARE PLAN** has to be agreed and signed by all parties before any of the invasive intimate care procedures are carried out by any staff member.

The protocol is followed rigidly for each procedure.

If at any time the child feels uncomfortable or does not want the procedure being carried out by staff members, the parent/guardian will be called to the school to assist the child.

The parent/guardian must come to the school or send a named person on the protocol as agreed on the written consent of this policy by the parent/guardian.

Our school's Intimate Care Policy and Procedures is sent home to all our newly enrolled Primary 1 parents during the first month in school. In specific situations, the policy will be discussed with parents, class teachers and other relevant members of the school staff at an individual child focused meeting.

(Where a child requires invasive intimate care procedures, it is at this part of the policy, we insert an individual care plan for the child and only the necessary personnel receive a copy of this policy with the added insertion which is applicable to them)

CONCERNS EMERGING FROM INTIMATE CARE:

If staff notice any unusual markings, discolouration or swelling, these must be noted and reported to the Designated Person for Child Protection (Mrs Hagan). In the absence of Mrs Hagan, Mrs Martin (Deputy Designated Teacher/Principal) should be notified.

If during the intimate care, he/she is accidentally hurt or becomes distressed, the member of staff involved will reassure the child and report what happened to the appropriate staff as above. It is important that any unusual emotional or behavioural response is noted. These concerns will be kept either in the child's personal file, or in a confidential Child Protection File, depending on the nature of the concern. Parents will be notified according in line with agreed school Safeguarding & Child Protection Reporting policy.

MONITORING AND REVIEWING THE POLICY

All teaching and assistant staff and parents will be involved in reviewing our Intimate Care Policy on a 3- yearly basis. New parents to school are consulted each September (or any time throughout the year) when their child enrolls in our school.

All staff in Saint Mary's Primary School will adhere to the school's Staff Code of Conduct when undertaking personal care of children in our school.

Last Reviewed	February 2020	
Reviewed	November 2020	Updated to: Reflect guidance in relation to Covid 19
Date Ratified by BOG:		
Date of next review:	November 2023	

**ST MARY'S PRIMARY SCHOOL, KILLYLEAGH
INTIMATE CARE POLICY**



PARENTAL PERMISSION FORM

Child:	
DoB:	
Address:	
Parent/Guardian:	

I/we give permission for the assistance detailed overleaf to be provided to my/our child, and will advise the school of any changes that may affect this provision.

Signed _____

I, the child, give permission for the assistance detailed overleaf to be provided to me.

Signed _____

ST MARY'S PRIMARY SCHOOL, KILLYLEAGH



Intimate Care Plan

Pupil:

DoB:

Diagnosis:

Assistance:

Timetable:

Persons assisting:

Alternative
arrangements:

Location/equipment:

Designation	Signed	Date
Parent		
Pupil		
Assistant/s		

Principal		
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ST MARY'S PRIMARY SCHOOL, KILLYLEAGH
INTIMATE CARE POLICY
Letter to Parent



Dear Parent/Carer,

Your child was changed today because he/she

- Got wet while playing in the water tray.
- Had a toileting accident.
- Got wet/dirty while playing outside.
- Other

Signed _____ Date _____

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Other

Signed

Date
