

Düsseldorf · Neuss · Meerbusch Region



ISR INTERNATIONAL SCHOOL
ON THE RHINE

INTIMATE CARE POLICY

ACADEMIC YEAR
2025/2026



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We intend to develop independence in each child, however there will be occasions when help is required. Our Intimate Care Policy has been developed to safeguard children and staff and is referred to in the school's Safeguarding Policy. The principles and procedures apply to everyone involved in the intimate care of children.

The purpose of this policy is:

- To safeguard the rights and promote the best interests of the children
- To ensure children are treated with sensitivity and respect, and in such a way that their experience of intimate care is a positive one
- To safeguard adults required to operate in sensitive situations
- To raise awareness and provide a clear procedure for intimate care
- To inform parents/carers about how intimate care is administered
- To ensure parents/carers are consulted in the intimate care of their children.
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Definition

Intimate care is one of the following:

- Supporting a child with dressing/undressing
- Providing comfort or support for a distressed child
- Assisting a child requiring medical care, who is not able to carry this out unaided
- Supporting a child in an activity where the child may come to harm if support is not offered
- Cleaning a child who has soiled him/herself, has vomited or feels unwell

Principles

Every child must be treated as an individual and care should be given as gently and as sensitively as feasible. As far as possible, the child should be allowed to exercise choice and should be encouraged to have a positive image of his/her own body. Given the right approach, intimate care can provide opportunities to teach children about the value of their bodies, to develop their safety skills, and to enhance their self-esteem. Parents and staff should be aware that matters concerning intimate care will be dealt with confidentially and sensitively and that the young person's right to privacy and dignity is maintained at all times.

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 their views taken into account
- every child has the right to have levels of intimate care that are appropriate and consistent.

Kindergarten/School Responsibilities

Where anticipated, intimate care arrangements are agreed between the school and parents and, if appropriate, by the child. Only in an emergency would staff undertake any aspect of intimate care that has not been agreed to by parents and the School other than the standard requirements of young children such as toileting and changing. In case of emergency, parents would be contacted immediately. The views of all relevant parties should be sought and considered to inform future arrangements.

If a staff member has concerns about a colleague's intimate care practice, he or she must report this to the Designated Safeguarding Lead (DSL) as outlined by the Safeguarding Policy.

Guidelines for Good Practice

These guidelines are designed to safeguard children and staff. They apply to every member of staff involved with the intimate care of children.

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

Care should not be carried out by a member of staff working alone with a child.

2. 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.

3. Be aware of your own limitations

Only carry out activities you understand and feel competent with. If in doubt, **ask** and do not carry out the care ensuring someone else has taken over. Some procedures must only be carried out by members of staff who have been formally trained and assessed, for example, First Aid.

4. 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's 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.

5. If you have any concerns, you must report them.

If you observe any unusual markings, discoloration or swelling report it immediately to the Designated Safeguarding Lead (DSL) as outlined in the Safeguarding Policy and use the guidelines given to support your actions. If a child is accidentally hurt during intimate care or misunderstands or misinterprets something, reassure the child, ensure their safety, and report the incident immediately to the DSL. Report and record any unusual emotional or behavioral response by the child.

Supporting dressing/undressing

Sometimes it will be necessary for staff to aid a child in getting dressed or undressed, particularly in Kindergarten. Teachers and staff will always encourage children to attempt undressing and dressing unaided.

Soiling

Intimate care for soiling should only be given to a child after the parents have given permission for staff to clean and change the child. Parents who have children in the Kindergarten and Grade 1 may be asked to indicate that the Kindergarten and Grade 1 teachers and staff can clean and change their child in the event of the child soiling themselves.

If the parents and emergency contacts cannot be contacted, the Head will be consulted. If put in a situation where the child is at risk, staff will act appropriately and may need to come into some level of physical contact in order to aid the child.

When touching a child, staff should always be aware of the possibility of invading a child's privacy and respect the child's wishes and feelings.

If a Kindergarten or Grade 1 child needs to be cleaned, the appropriate 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
- Physical contact is kept to the minimum possible to carry out the necessary cleaning
- Privacy is given appropriate to the child's age and the situation
- All spills of vomit, blood or excrement are wiped up and flushed down the toilet
- Any soiling that can be, is flushed down the toilet

- Soiled clothing is put in a plastic bag and sent home with the child

Hygiene

All staff must be familiar with normal precautions for avoiding infection, must follow basic hygiene procedures and have access to protective, disposable gloves.

Protection for staff

Staff members need to consider the danger of allegations being made against them and take precautions to avoid this risk. These should include:

- Gaining a verbal agreement from another member of staff that the action being taken is necessary
- Allowing the child, wherever possible, to express a preference to choose his/her carer and encourage them to say if they find a carer to be unacceptable
- Allow the child a choice in the sequence of care
- Be aware of and responsive to the child's reactions

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 ratio of female to male teachers or 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 oppositesex 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, the door closed, or screens/curtains put in place
- if the child appears 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 Designated Safeguarding Lead (DSL) and make a written record; parents must be informed about any concerns

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COGNIA (UNIFIED ORGANIZATION OF THE THREE US-BASED
ACCREDITATION AGENCIES NCA CASI, NWAC AND SACS CASI)
ECIS-EDUCATIONAL COLLABORATIVE FOR INTERNATIONAL SCHOOLS
CIS-COUNCIL OF INTERNATIONAL SCHOOLS (MEMBER)
CAMBRIDGE EXAMINATION CENTRE

