



Policy and Procedure

Cross Gates Primary School

Intimate Care Policy

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Introduction

Cross Gates Primary School is committed to safeguarding and promoting the welfare of children and young people. We are committed to ensuring that all staff responsible for intimate care of children will undertake their duties in a professional manner at all times. The Intimate Care and Toileting Policy regarding children has been developed to safeguard children and staff. They apply to everyone involved in the intimate care of children.

Definition

Intimate care is any care which involves washing, touching or carrying out an invasive procedure (such as cleaning up after a child has soiled him/herself), that most children can carry out for themselves, but with which some are unable to do due to physical disability, special educational needs associated with learning difficulties, medical needs or needs arising from the child's stage of development.

Aims and Objectives

This policy aims:

- To provide guidance and reassurance to staff and parent/s.
- To safeguard the dignity, rights and well-being of children
- To assure parents that staff are knowledgeable about intimate care and that their individual needs and concerns are taken into account

Toileting and the Foundation Stage Profile

Curriculum guidance for the Foundation Stage is clear that the role of the adult involves supporting the child's whole development, particularly their Personal, Social and Emotional Development (PSED) including supporting the transition between settings. One of the Early Learning Goals for children to achieve by the end of the Foundation Stage is to "manage their own basic hygiene and personal needs, including dressing and going to the toilet."

Intimate Care in Early Years, Key Stage 1 and Key Stage 2

First Steps Nursery (two year olds) – We recognise that children may not be toilet trained by this age. There are facilities within First Steps Nursery to change children if required. We are also able to support with potty training. If a child requires intimate care, parents should complete the intimate care form giving their consent to school providing intimate care.

EYFS – Wherever possible, children should be toilet trained when they enter nursery or reception. If this is not the case, parents should notify school via the intimate care form included in the starting pack and complete the form giving their consent to school providing intimate care.

Key Stage 1 – Wherever possible, children will be encouraged and supported to carry out their own intimate care. In the event that they are not able to, parents will be made aware that ANY member of staff may change children for odd 'accidents' but not routinely as part of day to day personal care. This does not apply if there is a medical need or SEND, in which case a written plan will be put in place (usually a Healthcare Plan or Intimate Care Plan). This will be applicable for the whole time a child is in KS1.

Key Stage 2 – Any child that soils or wets will NOT be changed by any member of staff. However, we will provide a private, safe space (toilet) where the child may change on their own. We will supply warm water, wet wipes and clean clothes (to the best of our ability out of the limited spares school has) and a carrier bag. A member of staff will provide verbal support. This does not apply if there is a medical need or SEND, in which case a written plan will be put in place (usually a Healthcare Plan or Intimate Care Plan). This will be applicable for the whole time a child is in KS2.

Parental responsibility

Partnership with parents is an important principle in any educational setting and is particularly necessary in relation to children needing intimate care. Much of the information required to make the process of intimate care as comfortable as possible is available from parents. Parents should be encouraged and empowered to work with staff to ensure their child's needs are identified, understood and met. This will include involvement with Health Care plans, Pupil Passports and any other plans which identify the support of intimate care where appropriate. Exchanging information with parents is essential through personal contact, telephone or correspondence. Should a child in KS1 soil or wet themselves accidentally, an attempt will be made to contact parents to notify them that support has been given to a child and the soiled/wet clothes will be sent home for cleaning. Permission does not need to be sought as staff act in a 'loco parentis' capacity.

What the school expects of parents:

- Parents/Carers will endeavour to ensure that their child is continent before admission to school (unless the child has additional needs).
- Parents/Carers will endeavour to ensure that their child is able to clean themselves after using the toilet.
- Parents/Carers will discuss any specific concerns with staff about their child's toileting needs.
- Parents/Carers must inform the school if a child is not fully toilet trained (including being able to clean themselves) **before** starting school, after which a meeting will then be arranged to discuss the child's needs.
- Parents/Carers accept that on occasions their child may need to be collected from school.

Staff responsibilities

Anyone caring for children, including teachers and other school staff, has a duty to care and act like any reasonably prudent parents. Intimate care routines should always take place in an area which protects the child's privacy and dignity. Children's intimate care routines should always be carried out by an assigned member of staff. Appropriate support and training should be provided when necessary.

The following steps will be taken to ensure health and safety of both staff and children:

1. Alert another member of staff who can support from a distance. There will never be more than one adult in a designated toilet area at one time, unless there are concerns around the child's emotional presentation and/or safety.
2. Escort the child to a changing area i.e. designated toilet area.
3. Collect equipment and clothes.
4. Adult to wear gloves.
5. Child to undress as appropriate and clean themselves as much as possible under the verbal guidance of an adult.
6. Soiled clothes to be placed inside carrier bags (double wrapped) and to be given to parents at the end of the day. Plastic gloves should be disposed of in the designated bin.
7. Children are expected to dress themselves in clean clothing, wash their hands and return to class
8. Adults should wash their hands thoroughly after the procedure.
9. Area to be cleaned and disinfected by adult before returning to class.

In Early Years, any intimate care carried out is recorded on Tapestry as part of the children's care diary. This includes the time, the nature of the incident (i.e. soiled or wet) and any additional information, e.g. Sudocrem applied.

In KS1/KS2 incidents must be recorded (in the child's class) including date, time, name of child, adult(s) in attendance, nature of the incident, action taken and concerns or issues. This will also monitor progress made. Parents/Carers are to be informed as soon as possible.

In the interests of Health & Safety, it is unreasonable for staff to be expected to change a child who regularly soils unless the child has a medical condition as an underlying cause. School does not have staffing levels to accommodate adults regularly leaving the class to attend to an individual's hygiene.

Special Educational Needs and Disabilities

The school recognises that some children with SEND and other children's home circumstances may result in children arriving at school with under developed toilet training skills. If a child is not toilet trained because of a disability his/her rights to inclusion are additionally supported by the SEN & Disability Act 2014 & Part 1V of the Disability Discrimination Act 2005.

If a child's toileting needs are substantially different than those expected of a child his/her age, then the child's needs may be managed through an Intimate Care Plan? Individual Healthcare Plan. A toileting program would be agreed with parents as advised by a Health Professional. Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the toileting plan. If there is no progress over a long period of time, e.g. half a term, the SEN Coordinator, teaching staff and parents would seek further support, e.g. G.P's referral of child for specialist assessment.

Some children may have an Educational Health Care Plan (EHCP) before entering school. The plan will outline the child's needs and objectives and the educational provision to meet these needs and objectives. The plan will identify delayed self-help skills and recommend a program to develop these skills. The management of all children with intimate care needs will be carefully planned. Where specialist equipment and facilities above that currently available in the school are required, every effort will be made to provide appropriate facilities in a timely fashion, following assessment by a Physiotherapist and/or Occupational Therapist.

Child Protection

Careful consideration will be given to individual situations to determine how many adults should be present during intimate care procedures. As stated above, it is acceptable for only one member of staff to assist unless there is an implication for safe moving and handling of the child. The needs and wishes of children and parents will be considered wherever possible, within the constraints of staffing and equal opportunities legislation.

If a member of staff has any concerns about physical changes in a child's presentation (unexplained marks, bruises or soreness for example) the recognised child protection procedures should be followed, recording via CPOMS to a designated member of staff. If a member of staff notices any changes to a child either physically or emotionally following an episode of intimate care, the matter will be investigated at an appropriate level and outcomes recorded. Parents/Carers will be contacted at the earliest opportunity. Local Child Protection procedures will be adhered to at all times.