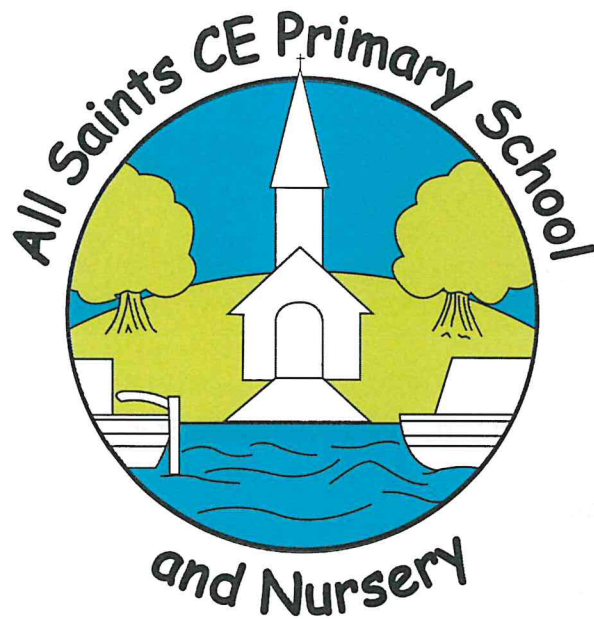


Intimate Care and Toileting Policy



***'Learning for life,
building a firm foundation'***

Reviewed: September 2023

Agreed by the Governors:

Signed:

Headteacher: Lisa Harrison

Signed:

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Our vision, *Learning for life, building a firm foundation*, is really important in terms of Intimate care and toileting as we believe that all children need the foundation to enable them to learn and understand from an early age the importance of independent toileting and personal hygiene. We support our families with the process of toilet training and reinforce on the learning and development done at home.

Aims

This policy aims to ensure that:

- Intimate care is carried out properly by staff, in line with any agreed plans.
- The dignity, rights and wellbeing of children are safeguarded.
- Pupils with intimate care difficulties are not discriminated against, in line with the Equalities Act 2010.
- Parents are assured that staff are knowledgeable about intimate care and that the needs of their children are taken into account.
- Staff carrying out intimate care work do so within guidelines (i.e. health and safety, manual handling, safeguarding protocols awareness) that protect themselves and the pupils involved.
- Intimate care refers to any care given to a child around toileting, washing, changing, touching or carrying such as cleaning up after a child has soiled him/herself

This policy complies with statutory safeguarding guidance

This policy links with several school policies, practices and action plans including:

- Child Protection and Safeguarding policy
- Health and Safety Policy
- Staff recruitment Policy
- Special Educational Needs Policy

Partnership with Parents

Parents and carers have a key role to play in supporting effective toilet training. Parents may feel anxious and responsible when their child has not yet achieved this developmental stage. It is important to build up their confidence especially if they have already experienced difficulties in trying to toilet train their child.

Guiding Principles

Children who have difficulties in controlling their bladder and/or bowels have often had a difficult start developing personal independence. It is sometimes possible to understand why early training has been missed, has proved ineffective or is not yet possible. These children have an educational entitlement irrespective of their difficulties with toileting.

- Children or young people who need assistance with toilet training or special toileting arrangements must be treated with respect, dignity and sensitivity. Staff should respect their need for privacy and confidentiality, being aware that these children may be vulnerable to ridicule and bullying on account of their additional needs.
- Parents and carers have a key role to play in effective toilet training. It is important to plan consistent approaches across different settings.

- Settings and Schools, in partnership with parents or carers and any other professionals involved, should make plans to work towards the earliest possible, or the optimal possible, independence with toileting.
- All staff should be provided with access to appropriate resources and facilities, and be supported through clear planning, policy guidelines, and training.
- Heads of Settings and Schools must be aware of, and ensure implementation of, appropriate health and safety procedures and risk assessments.
- Heads of Settings and Schools, Governors and Management Committees must be aware of their duties under the Equality Act 2010.
- Schools must consult Social Care staff whenever planning toilet training or special toileting arrangements for children subject to Child Protection procedures.
- Schools should take action if any attendance difficulties develop as a consequence of toileting issues. Early Years' Settings could seek advice from the Integrated Disability Service (Teaching & Learning) 0-5 Team.

Special Educational Needs

Children with Communication and Language difficulties:

Children who are non-verbal and have language and communication needs will benefit from the use of visual cues (photos, symbols, signs, Picture Exchange), as well as sequencing cards to reinforce routines.

<http://www.bladderandboweluk.co.uk/children-young-people/children-resources/>

<http://www.bladderandboweluk.co.uk/children-young-people/children-schools/>

Children with Autistic Spectrum Condition:

Children with Autistic Spectrum Condition often like routine; staff can build upon this desire for predictability to develop a successful toilet training routine. The National Autistic Society website advises teaching the whole routine from the child communicating their need to use the toilet through to the washing and drying of hands, rather than just sitting on the toilet. Show the child a photo or symbol of the toilet, say the child's name, "toilet", take them into the toilet, following a 10 visual sequence for the whole routine. Often when an activity is anticipated, less resistance occurs. Having a visual sequence beside the toilet and then above the sink will help the child know what is expected.

Liaison with parents and carers is vital to agree on the routine to be followed both at home and school. Using the same visual cues and sequences can also help to support the routine.

You will need to decide whether or not and how to praise the child for successfully following the toileting routine. Some children enjoy and respond to praise, others respond better to an object or a toy. Some children find praise difficult so a preferred activity after toileting may work better. It's important to remember that all children are different and they will not all respond to the same strategies- what works for one child may not work for another.

More advice on toileting is available from the National Autistic Society website: <http://www.autism.org.uk/living-with-autism/understanding-behaviour/toilet-training.aspx>

Children with medical needs and /or disabilities:

Some children will have complex or long-term medical conditions which indicate the need for special toileting arrangements. These children will usually be known to staff in the Integrated Disability Service (Teaching & Learning), as well as professionals in Health.

Please refer to the GUIDANCE ON SPECIAL TOILETING NEEDS IN SCHOOLS AND EARLY YEARS' SETTINGS in Appendix A for further guidance.

Pupil "Voice"

It is good practice to always take into consideration the views of the child / young person. This is especially important if they are likely to need support long term. This may include asking which toilet cubicle they prefer, if they are comfortable with the staff supporting them or if they are comfortable going to the toilet at a busy time.

It is important for the pupil to feel they are in control of their personal care and it is not something that is 'done to' them. To support this, young people should be actively involved in the decision making and encouraged to appropriately direct the staff supporting them. It may be possible to personalise an area, especially if they are spending a lot of time in there.

All young people should be given regular opportunities to share their views regarding their personal care with someone they are comfortable talking to and who is not directly involved in their personal care. Any changes in behaviour regarding personal care, for example demonstrating a reluctance to go to the toilet, a sudden increase in the number of accidents or stopping eating and drinking to prevent needing the toilet, should be promptly followed up, as not going to the toilet in the school day can seriously impact on a young person's health.

Roles of staff

Any roles who may carry out intimate care will have this set out in their job description.

No other staff members can be required to provide intimate care.

All staff at the school who carry out intimate care will have been subject to an enhanced Disclosure and Barring Service (DBS) with a barred list check before appointment, as well as other checks on their employment history.

Staff will receive:

- Regular safeguarding training
- If necessary, manual handling training that enables them to remain safe and for the pupil to have as much participation as is possible

They will be familiar with:

- The control measures set out in risk assessments carried out by the school
- Hygiene and health and safety procedures, including those related to COVID-19
- They will also be encouraged to seek further advice as needed.

When carrying out procedures, the school will provide staff with:

- Protective gloves, aprons, masks, cleaning supplies, bins including nappy bins and nappy bags.
- For pupils needing routine intimate care, the school expects parents to provide, when necessary, a good stock of necessary resources, such as nappies, underwear and/or a spare set of clothing.
- Any soiled clothing will be contained securely and discreetly returned to parents at the end of the day.

- Record if support with personal care is given e.g. helped to change, occasional accident or when pulls up are changed. This is also fed back to parents and carers verbally.

Creating an intimate care plan

For children who need routine or occasional intimate care (e.g. for toileting or toileting accidents), parental permission will be sought before performing any intimate care procedure.

For children whose needs are more complex or who need particular support an intimate care plan will be created in discussion with parents – see appendix A.

If the school is unable to get in touch with parents and an intimate care procedure urgently needs to be carried out, the procedure will be carried out to ensure the child is comfortable, and the school will inform parents afterwards.

Where an intimate care plan is required, it will be agreed in discussion between the school, parents, the child (when possible) and any relevant health professionals.

The school will work with parents and take their preferences on board to make the process of intimate care as comfortable as possible, dealing with needs sensitively and appropriately.

Subject to their age and understanding, the preferences of the child will also be taken into account. If there's doubt whether the child is able to make an informed choice, their parents will be consulted.

The plan will be reviewed and updated regularly, as well as whenever there are changes to a pupil's needs.

Settings and Schools, in partnership with parents or carers and any other professionals involved, should make plans for school outings, trips and residential.

Safeguarding Children

Personal care may involve certain activities that leave staff feeling vulnerable to accusations of abuse. It is unrealistic to expect that all risk will be eliminated, no matter what level of vigilance is adopted, but it is hoped that staff following this guidance will feel less fearful. The process of changing a nappy or toileting a child should not normally raise child protection concerns, and there are no regulations that require two members of staff to be available. However, if there is a known risk of allegation or a child has been subject to a child protection investigation, then a single person should not undertake personal care.

Personal care should only be undertaken by staff employed by the school/setting with a satisfactory enhanced DBS (Disclosure & Barring service).

Children with disabilities may be particularly vulnerable because:

- They may not be able to communicate what is happening;
- Due to hospitalisation, fostering, residential / short break care they may have multiple carers;
- They may not have had access to good quality, well differentiated PSHE and SRE.

Schools must consult Social Care whenever planning toilet training or special toileting arrangements for children with a Child Protection Plan.

Schools should invoke Safeguarding Children procedures whenever there are indications that a child is at risk of significant harm.

Intimate Care and Toileting in the Early Years Foundation Stage

No child is excluded from participating in our setting who may, for any reason, not yet be toilet trained and who may still be wearing nappies or equivalent.

We work with parents towards toilet training, unless there are medical or other developmental reasons why this may not be appropriate at the time.

We exercise good hygiene practices in order to accommodate children who are not yet toilet trained.

We see toilet training as a self-care skill that children have the opportunity to learn with the full support and non-judgemental concern of adults.

Procedures

- All staff are aware of the children in their care who are in 'pull-ups' and those children who have occasional accidents.
- Our changing area is in the nursery/reception toilets (pupils are familiar with this area) Staff ensure the area is free from other children and that the child feels comfortable. The door is always open to ensure another staff member can be seen.
- Each child's bag is collected before changing so their pull ups and changing wipes are to hand.
- Our staff put on gloves and aprons before changing starts and the areas are prepared. New gloves are used each time a new child is changed.
- All our staff are familiar with our hygiene procedures and carry these out when changing nappies.
- We are gentle when changing; we avoid pulling faces and making negative comments about 'nappy contents'.
- In addition, we ensure that nappy changing is relaxed and a time to promote independence in young children.
- We encourage children to take an interest in using the toilet.
- We encourage children to wash their hands, and have soap and towels to hand. They should be allowed time for some play as they explore the water and the soap.
- Children access the toilet when they have the need to and are encouraged to be independent.
- We dispose of nappies and pull ups hygienically. The nappy or pull up is bagged and put in the bin. Any clothes will be bagged up and discretely given to parents at the end of the session.
- We gather as much information as possible from the parents and carers and child. How have they tried to introduce toilet training at home? What happens at home? Has the child any regular routines or daily patterns which could inform the routine set-up by the school? Have the parents/carers noticed any particular difficulties, or phobias which the school should be aware of? Can the parents/carers suggest a strategy or procedure for dealing with the problem?

- A member of staff familiar with the child is given the responsibility of taking the child to the toilet at fixed appropriate intervals throughout the morning/day. Careful observations and discussions with the child may identify when the child "needs to go".
- Ensure that the routine established in school is strictly maintained from the start and try hard to avoid accidents. If necessary shorten the time between visits to the toilet so that the child gets into the habit of being dry.
- Children may be anxious and pre-occupied by toilet difficulties but usually respond to praise, encouragement and confidence building. It is important to promote self-esteem in other areas.
- Reminders to use the toilet should be discreet and staff may consider the use of signs and pictures.
- Make little fuss over accidents that do occur and ensure that they are dealt with swiftly, appropriately, sympathetically and in a calm low-key way. Give extra attention when they have made the effort to go to the toilet independently.
- No child should be left wet or dirty for a parent/carer to change later.
- It is not reasonable to expect parents or carers to be on emergency stand-by to change children during the school day.
- After a period of training it may be sufficient to remind the child to go to the toilet on their own. Be positive and patient and praise the child for effort.
- Clothing: consider manageability (Velcro/elastic waists etc) for the child to be as independent as possible. In school this should be sympathetic with school uniform.

Partnership with Parents

Open and supportive communication with parents is fundamental to planning for and meeting the child's toileting needs effectively and sensitively. Many parents may feel anxious that their child is not able to use the toilet independently and may have already experienced some difficulties with toilet training and/or experienced negative attitudes from others towards the issue. For some children their toileting needs may be relatively short term and related to initial toilet training, whereas others may require a long term toileting programme. Parents will need to feel confident that the setting is able to support their child's toileting needs and is positive about doing so.

An appropriate toileting programme will need to be discussed and agreed so that the child, parents/carers and staff are aware of their roles and responsibilities. The plan should give careful consideration to choosing which adults should be involved in toileting care. Schools and pre-school settings should give a written copy of the programme to the parents/carers. policy, procedures and principles of good practice toileting-needs.

Clothes should be easy for the child to pull up and down. Wherever possible it is better to train the child with appropriate clothing rather than continuing to rely on 'pull ups'.

Staff should ask parents/carers to provide the school with a couple of appropriate changes of pants/trousers etc in case of accidents.

It is the responsibility of parents/carers to deal with wet/soiled clothing. Staff should liaise accordingly and make the necessary arrangements.

Intimate Care Plans

The staff at All Saints CE Primary School and nursery will follow agreed procedures when attending to the care or continence needs of any pupil within the setting, whether this be a child with a care plan agreement or a child who has had an occasional 'accident'.

Where a pupil has particular needs (e.g. wearing pull-ups regularly, or has continence difficulties which are more frequent than the odd 'accident', staff will work with parents/carers (and health visitors/school nurse, if appropriate) to set out a care plan to ensure that the child is able to attend daily.

Concerns about safeguarding

If a member of staff carrying out intimate care has concerns about physical changes in a child's appearance (e.g. marks, bruises, soreness), they will report this using the school's safeguarding procedures.

If a child is hurt accidentally or there is an issue when carrying out the procedure, the staff member will report and record the incident immediately.

If a child makes an allegation against a member of staff, the responsibility for intimate care of that child will be given to another member of staff as quickly as possible and the allegation will be investigated according to the school's safeguarding procedures.

Dissemination of the Policy

This policy has been made accessible to parents, teachers and other school staff, governors through the school website. Anyone wanting a printed copy should make a request to the school office. Should further information be required, please contact the school.

**All Saints CE Primary School and Nursery
Intimate Care Plan**

Date:

Name of child	
Name of person(s) to change the child:	
Name of person(s) to change the child if main adult unavailable:	
How often child will be checked/changed?	
Where changing will take place:	
What resources and equipment will be used:	
Who will provide the resources and equipment that will be used:	
Training requirements for staff:	
Disposal of product in:	
Infection control measures:	
Special arrangements for trips/ outings:	
When will the plan be reviewed:	
Review comments:	

If the child is unduly distressed, a member of staff will contact the parent/carer. If the above named member of staff is not available due to illness or staff training, then another person, familiar to the child will attend to the child's needs.

All Saints CE Primary School and Nursery Intimate Care Plan Agreements

The parent:

- I agree to ensure that the child is changed at the latest possible time before being brought to the setting/school
- I will provide the setting/school with spare nappies or pull ups and a change of clothing
- I understand and agree the procedures that will be followed when my child is changed at school – including the use of any cleanser or wipes
- I agree to inform the setting/school should the child have any marks/rash
- I agree to a 'minimum change' policy i.e. the school will not undertake to change the child more frequently than if s/he were at home.
- I agree to review arrangements should this be necessary

Signed: (parent/carer)

The school:

- We agree to change the child during a single session should the child soil themselves or become uncomfortably wet
- We agree to monitor the number of times the child is changed in order to identify progress made
- We agree to report should the child be distressed, or if marks/rashes are seen
- We agree to review arrangements should this be necessary.

Signed: (school member of staff)

Name: (school member of staff)

Date:

