



Policy for intimate care

This policy was reviewed in October 2023 and was approved by governors in November 2023

Introduction

The care of our children is central to the aims and ethos of our school. It is our intention to develop independence in each child; however, there will be occasions where help is required.

Intimate care can be defined as an activity required to meet the personal care needs of an individual child, in partnership with the parents/carer and the child. In most cases such care will involve procedures to do with personal hygiene, as part of a staff member's duty of care, but could include supervising a child involved in intimate self-care; assisting a child with toileting or to change his/her clothes, or providing first aid assistance. In the case of a specific procedure, such as for medical support, only a person suitably trained and assessed as competent, will undertake the procedure.

The issue of intimate care is a sensitive one and requires staff to be respectful of the child's needs. The child's dignity should always be preserved, with a high level of privacy, choice and control. There will be a high awareness of child protection issues. Staff behaviour must be open to scrutiny and staff must work in partnership with parents/carers to provide continuity of care to children wherever possible.

Thelwall Community Infant School, including Thelwall Little Explorers Nursery, are committed to ensuring that all staff responsible for the intimate care of children will undertake their duties in a professional manner at all times.

For those children beyond nursery age who need **regular** intimate care, an **Individual Health Care Plan** will be established; through discussion with parents/carers, health advisors and school and reviewed annually or more frequently if deemed appropriate. Parents must, whenever practicable, give permission prior to intimate care being carried out. #

Parents/Carers of children of nursery age will be required to complete the **Individual Toilet protocol** form (appendix 1) before their start date if their child is not toilet trained. It is the responsibilities of the parents to provide nappies/pull ups, nappy cream, wet wipes. If the child is being toilet trained parents are required to provide several spare clothes.

Our Approach to Best Practice

Children who require intimate care are treated with respect at all times; the child's welfare and dignity is of paramount importance. Staff who provide intimate care will be trained to do so (including Child Protection and Health and Safety training in moving and handling, when appropriate) and are fully aware of best practice. Apparatus will be provided, if necessary, to assist with children who need special arrangements; following assessment from an occupational therapist/physiotherapist.

A child will be supported to achieve the highest level of autonomy possible, given their age and abilities. Staff will encourage each child to do as much for themselves as they can. This may mean giving the child responsibility for washing themselves. Where appropriate, an **Individual Health Care Plan** (see supporting children with medical needs policy) will be drawn up for particular children (those beyond nursery age).

Each child's right to privacy will be respected. Careful consideration will be given to each child's situation to determine how many adults might need to be present when a child is receiving intimate care. **Usually, one child is supported by one adult.** However, in some instances it may be appropriate for two members of staff to change/support a child, i.e. if a child gets very distressed.

Wherever possible, the same child will not be cared for by the same adult on a regular basis, but will receive support from a range of familiar adults. This will ensure, as far as possible, that over familiar relationships are discouraged from developing, whilst at the same time guarding against the care being carried out by a succession of completely different adults. Intimate care arrangements will be discussed with parents/carers on a regular basis. The needs and wishes of children and parents will be taken into account, wherever possible, within the constraints of staffing and equal opportunities legislation.

The management of all children with regular intimate care needs will be carefully planned, discussed with parents/carers and relevant agencies (as appropriate) and will be written into an **Individual Health Care Plan** (see supporting children with medical needs policy) for children beyond nursery age.

For nursery aged children who need regular intimate care an **Individual Toilet protocol (Appendix 1)** will be put in place. This will set out a clear account of the agreed arrangements, adults involved in the child's intimate care and be an accurate record of when a child requires assistance with intimate care. These records will be kept in the child's file and be available to parents/carers on request. Staff providing intimate care should explain what they are doing, through communicating with the child in a way that reflects their age.

The Protection of Children

Education Child Protection Procedures and Inter-Agency Child Protection procedures will be adhered to. All children will be taught personal safety skills, carefully matched to their level of development and understanding.

If a member of staff has any concerns about physical changes in a child's presentation, e.g. marks, bruises, soreness etc they will immediately report concerns to the Designated Person for child protection.

If a child becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be looked into and appropriate steps will be taken to ensure the child's safety is paramount whilst following the school's safeguarding procedures. Further advice will be taken from outside agencies if necessary. If a child makes an allegation against a member of staff, all necessary procedures will be followed.

Children, beyond nursery age who have a long-term incontinence or a disability requiring regular intimate care, may require specially adapted facilities. Within Thelwall Infant School the disabled toilet areas would be used. Advice would be sought from professionals and discussed with parents/carers, if additional or adapted facilities are needed.

Nappy Changing Children starting the nursery setting (Thelwall Little Explorers) not yet toilet trained will be changed in the designated area. The area has been planned to allow privacy and dignity whilst following the correct safeguarding procedures. Parents will be encouraged to toilet train their child before they start. Staff will work together with parents and outside agencies if necessary, to agree strategies and expectations.

Children who are being toilet trained will use the nursery toilets in the designated area to allow the child privacy.

Parents/carers will be expected to have a role to play when their child is still wearing nappies. Parents/carers should provide nappies; nappy cream, wipes and any spare clothes etc. and parents should be made aware of this responsibility within the Individual Toilet Protocol. The school will be responsible for providing gloves, plastic aprons, a mat, disposable bags, a bin and liners to dispose of any waste.

Staff should wear a plastic apron and gloves when dealing with a child who is soiled or when changing a soiled nappy. Any soiled waste should be placed in a polythene waste disposal bag, which can be sealed. This bag should then be placed in a bin (complete with liner) which is specifically designated for the disposal of such waste. This is emptied daily.

It is not expected that a child will be still wearing nappies on admission to school in Reception (aged 4 -5). Parents/carers are encouraged to ensure children are toilet trained and able to manage their own hygiene by the time their child starts school.

However, if due to medical needs, a child still requires use of nappies an Individual Health Care Plan will be written, in liaison with parents/carers and the child's medical team.

Wetting / Soiling in School

If there is a **medical reason** for wetting / soiling the appropriate support for this will be identified as part of the child's Individual Health Care Plan (for children beyond nursery age).

On the **rare occasion** a child wets themselves, a change of clothes will be given. The child will be encouraged to wash, dry and change themselves. Nursery children will be assisted as necessary. Parents will be informed either at the end of the day, when their child is collected, or by telephone.

If on a **rare occasion** a soiling accident has occurred, staff will support a child to clean themselves, and to put on clean clothes. However, if a child is heavily soiled and we feel they need a more thorough wash, parents will be contacted and requested to either come and clean their child or take them home to clean them before returning them to school.

Special Educational Needs and Disabilities.

Children with special educational needs and disabilities have the same rights to safety and privacy when receiving intimate care. An Individual Health Care Plan will be written, if required, with agreements between the child (where appropriate) parents/carers and the school. A Toilet Management Plan may also be agreed with parents, following advice by Health/continence professionals. The Individual Health Care Plan and Toilet Management Plan will be reviewed regularly. Accurate records of the child's need for intimate care assistance will be kept (Appendix 2). These records will be kept in the child's file and be available to parents/carers on request. Regardless of age and ability, the views and/or emotional responses of children with special needs will be actively sought (with advocacy arrangements made for those who can't) when arrangements are being reviewed.

Physical Contact

All staff engaged in the care and education of children, need to exercise caution in the use of physical contact. The expectation is that staff will work in a 'limited touch' culture and that when physical contact is made, this will be in response to the pupil's needs at the time; will be of limited duration and will be appropriate to their age, stage of development and background.

Staff should be aware that, even well-intentioned physical contact might be misconstrued either directly by the child, an observer or by anyone the action is described to. Staff must therefore always be prepared to justify actions and accept that all physical contact be open to scrutiny. Physical contact which is repeated with an individual child or young person is likely to raise questions, unless the justification for this is formally agreed by the child, the organisation and those with parental responsibility.

Changing Clothes

Children are entitled to respect and privacy when changing clothes. However, there must be the required level of supervision, to safeguard children with regard to health and safety considerations and to ensure that bullying or teasing does not occur. Children are encouraged to use the toilet cubicle when changing themselves after a toileting accident.

This means that adults avoid any physical contact when children are in a state of undress and avoid any visually intrusive behaviour.

Record keeping

All instances of intimate care (including monitoring of children changing and cleaning themselves) must be recorded in the intimate care log (located in disabled toilet) which will include information on date, time and the staff member dealing with the incident.

Individual Toilet Protocol (appendix 1)

Within an Individual toilet protocol for nursery aged children who require intimate care for toileting / changing, the following issues will be given consideration where appropriate:

- Date of plan and name of child
- Parents comments about their child's awareness of toileting/bodily function.
- An agreement for toilet training.
- Medical needs or other important information.

Record of intimate care intervention (appendix 2)

This includes:

- Date of intimate care given.
- Time care given.
- Details of care given.
- Details of staff member providing intimate care.

This Policy links to:

Safeguarding & Child Protection Policy

Health and Safety Policy

Complaints Policy

Supporting children with medical needs policy

Further Guidance:

Working Together to Safeguard Children

Keeping Children Safe In Education

Appendix 1: Individual Toilet Protocol

Example Toileting Plan for use in Early Years Settings

Toileting Plan for:..... Date:.....

_____ -is currently in nappies/pull ups and is not yet showing any awareness of being wet/soiled OR is currently in nappies/pull ups and is showing some awareness by (eg: going to changing area/verbally saying)

_____ (Key person's name) will mainly be responsible for changing

_____ whilst at nursery to ensure continuity of care. However other staff will also be aware of his/her needs and will be available to change him/her when required.

Thelwall nursery will provide a changing mat, gloves and disposable aprons. Parent/carer will provide consumables which could include nappies/pull ups, wipes, nappy sacks and spare clothes.

_____ will be changed on a changing mat in the disabled toilet area.

Other arrangements specific to that individual child : (including whether child needs assistance is laying themselves down or getting up or times that child will be checked or changed)

The door will be kept ajar and other nursery staff will be aware of staff taking children to change them.

Used disposable nappies will be (placed in a nappy sack and disposed of

Staff will record date and time of changing and whether child was wet/dry/soiled. This information will be shared with parent/carer.

This plan will be reviewed as the child's needs change.

Signed Parent/carer

Signed Key person/senco etc

