



Toileting and Intimate Care Policy

Reviewed: July 2022
Last Review: January 2024
Next Review: January 2027

Our Mission

Empower children to love learning, respect all and THRIVE.

Our Vision

To nurture an inclusive, safe and ambitious community which inspires children to become life-long learners who are confident, creative and kind.

Introduction

Redbourn Primary School is aware that some learners may require assistance from members of staff for personal care, including toileting, either due to the age and developmental level of the student, or as a result of disability or medical need.

The main aim of the school is to ensure that our learners are safe, secure and protected from harm. The intimate care policy aims to provide a clear framework for staff to ensure the safety and dignity of all learners who need support with personal care, including toileting and continence management. It will also clarify for learners and their families the support they

can expect from school. The policy reflects the school mission, vision and THRIVE values and philosophy in relation to the intimate nature of care routines for children within school.

All children at Redbourn Primary school have the right to be safe and be treated with dignity, respect and privacy at all times so as to enable them to access all aspects of the setting.

This policy sets out clear principles and guidelines on supporting intimate care with specific reference to toileting. It should be considered in line with our Safeguarding Policy, Health and Safety Policies which includes administering of medicines.

This policy supports the safeguarding and welfare requirements of Early Years Foundation Stage (EYFS) 2021 and the Equalities Act 2010: Redbourn Primary School will ensure that:

- No child's physical, mental or sensory impairment will have an adverse effect on their ability to take part in day to day activities.
- No child with a named condition that affects personal development will be discriminated against
- No child who is delayed in achieving continence will be refused admission
- Adjustments can be made for any child who has delayed incontinence.

Intimate Care Tasks

This includes any task that involves the dressing and undressing, washing (including intimate parts), helping someone use the toilet, changing nappies or carrying out a procedure that requires direct or indirect contact to an intimate personal area. It does not involve any invasive procedures over and above wiping the external genital area with a wipe.

The issue of intimate care is a sensitive one and will require 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 discretion. There shall 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.

A record of all support with intimate care will be kept and shared with parents via Medical Tracker. This will include the date and time of the care, who was present and any care given together with the reason for this. Any changes in the learner's behaviour or appearance will be documented and reported to a senior member of staff, in line with the safeguarding policy.

Partnership with Parents/Carers

Parents/carers must ensure that they provide all relevant information to school, as soon as possible, so that the needs of their child can be met. This includes the nature of their child's needs, details of any healthcare professionals involved including specialist nurses, as well as any changes in their medication, care or condition.

Parents/carers must ensure that they work towards their child achieving the maximum possible level of independence at home.

Where necessary, parents/carers should work with school to develop an agreed care plan (Appendix 1).

The care plan will set out:

- What care is required
- Number of staff needed to carry out the task (if more than one person is required, a reason will be documented)
- Additional equipment required
- Child's preferred means of communication (e.g. visual, verbal). Agree terminology for parts of the body and bodily functions
- Child's level of ability i.e. what tasks they are able to do by themselves
- Respect for any cultural or religious sensitivities related to aspects of intimate care
- Be regularly monitored and reviewed in accordance with the child's development.

Only in an emergency would staff undertake intimate care that has not been agreed with the parents/carers. This act of care would be reported to a senior member of school staff and to the parents/carers (via Medical Tracker) as soon as possible after the event. The reasons for this and the care undertaken would be documented by the staff member who had delivered the care using Medical Tracker.

Parents/carers must make sure that school always has required equipment available for their child's intimate care or toileting needs. These should be kept in a named bag:

- Spare nappies
- Wipes, creams, nappy sacks etc.
- Spare Clothes
- Spare underwear

Parents/carers must ensure that school always has their emergency contact details.

Best Practice

When intimate care is given, the member of staff explains fully to the child each task that is carried out and the reason for it. Staff encourage children to do as much for themselves as they can, lots of praise and encouragement will be given to the child when they achieve it.

All staff working at Redbourn Primary School have an enhanced DBS disclosure. **Therefore, in order to ensure the privacy and wellbeing of children, in most cases it is appropriate for only one adult to change a child.** That adult will inform another member of the staff team that they are going to change a child. In some cases, it may be appropriate for two members of staff to be present when changing – this will be discussed with a member of SLT.

Safeguarding

All members of staff are trained in Child Protection and on the signs and symptoms of child abuse. If a member of staff is concerned about any physical or emotional changes, such as marks, bruises, soreness, distress etc. they will inform the Designated Senior Person (DSP) immediately. The Child Protection Policy will then be implemented.

If a child makes an allegation against a member of staff, or a member of staff against another member of staff, the procedure set out in the Child Protection Policy will be followed.

Changing children

The dignity and privacy of the child is paramount. An area which is or can be made private will be provided for the provision of intimate care, usually the toilet cubicle. There is also a disabled toilet within the school should this be required. A changing mat may be used if necessary and this will be kept in the disabled toilet. Consideration of the use of each area

will be given from a child protection and health and safety aspect. When a child is changed it will be recorded and parents notified if appropriate.

Dealing with body fluids

Urine, faeces, blood and vomit will be cleaned up immediately and disposed of safely by double bagging and placing in the medical waste bin.

In the case of nappies they will be double bagged and placed in the nappy bin.

When dealing with body fluids, staff will wear protective clothing (disposable plastic gloves and aprons) and wash themselves thoroughly afterward.

Soiled children's clothing will be bagged to go home and staff will not rinse it.

Children will be kept away from the affected area until the incident has been completely dealt with.

If a child does two or more loose stools in their nappy in the same day, parents will be notified and may be asked to collect them in line with our diarrhea and vomiting guidance.

If intimate care is needed which involves an invasive procedure over and above wiping the external genital area, parents will be called to clean their child.

All staff maintain high standards of personal hygiene and will take all practicable steps to prevent and control the spread of infection.

A record will be kept **on Medical Tracker** of all support with intimate care. This will include the date and time of the care, who was present, and any care given that has differed from the care plan (if there is one) together with the reason for this. Any changes in the learner's behaviour or appearance will be documented and reported to a senior member of staff, in line with the safeguarding policy.

As a parent, I agree to the points as set out in the Redbourn Primary School Intimate Care Policy.

I am happy for my child to be changed at school, with the rules of the policy being adhered to.

I agree to come in to school to clean my child if they have had a toileting accident which involves more than wiping the external genital area with a wipe.

I agree to work with staff as detailed in the policy.

Parent's name:

Child(ren):

Class(es):

Signature:

Date:

Intimate Care Plan

Child's Name:	Date:
Main areas of need: <ul style="list-style-type: none">•••	
Toileting/nappy changing plan:	
Dressing/undressing plan:	
Discussed and agreed with parents/carers/child (as appropriate) on date: Signed..... Parent/Carer Signed..... Class teacher Signed..... Phase Leader	