



# **Intimate Care and Toileting Policy**

Date of Policy: 2024 - 2026

'Our village school strives to provide the best possible education for all its children in a caring and happy Christian community.'

#### Statement

At Puttenham CofE Infant School we believe children have the right to be safe, be treated with courtesy, dignity and respect, and to be able to access all aspects of the education curriculum. The Local Committee recognises its duties and responsibilities in relation to the Equalities Act 2010, which requires that any pupil with an impairment that affects their ability to carry out day-to-day activities must not be discriminated against. The Local Committee is dedicated to ensuring that all staff responsible for the intimate care of pupils will undertake their duties in a professional manner at all times. It is acknowledged that these adults are in a position of great trust. We understand that SEND, medical needs and other home circumstances may result in some children arriving at school with under developed toilet training skills. The aim of this policy is to ensure that appropriate provision is made for such children.

Puttenham CofE Infant School is committed to safeguarding and promoting the welfare of children. This policy gives clear guidelines on how to undertake the toileting and intimate care of children in a professional manner at all times.

Prior to starting school, prospective parents will be reminded of the schools' expectation that pupils should be toilet trained before they start school. If a child is not fully toilet trained before starting school, the parents/carers must inform the school. A meeting will then be arranged prior to the child's start date. The child's needs will be discussed and reasons for the child not being fully toilet trained will be recorded. Staff will advise parents/carers to contact their Health Visitor or GP. The school undertakes to attempt to support any training programme requested by a child's GP

and/or the school doctor or parent. In some circumstances, it may be appropriate to set up a home/school agreement.

### Aim

- To safeguard the rights and promote the welfare of children
- To provide guidance and reassurance to staff whose role includes intimate care
- To assure parents that staff are knowledgeable about personal care and that their individual concerns are taken into account

## **Key principles:**

- Children have a right to feel safe and secure
- Children have a right to an education and schools have a duty to identify and remove barriers to learning for pupils of all abilities
- Children must be respected and valued as individuals
- Children have a right to privacy, dignity and a professional approach from staff when meeting their needs
- Children have the right to information and support to enable them to make appropriate choices
- Children have the right to express their views and have them heard
- Any support provided or plan developed should be designed to lead to independence
- The school has a complaint procedure that can be implement if required
- Staff are knowledgeable about the intimate care and toileting procedures
- Children/young people have the right to be accepted for who they are, without regard to age, gender, ability, race, culture or beliefs.

### **Definition of Intimate Care:**

'Care tasks of an intimate nature, associated with bodily functions, bodily products and personal hygiene, which demands direct or indirect contact with, or exposure of, the sexual parts of the body.' (Surrey Intimate Care and Guidance Policy)

Intimate care tasks specifically identified as relevant include:

- dressing and undressing (underwear)
- changing nappies/incontinence pads
- cleaning, wiping and washing intimate parts of the body
- bathing/showering
- helping a child use the toilet
- assisting with medicines such as suppositories/enemas or other Doctor directed medical interventions or medicine.

### **Definition of Personal Care:**

'Although it may involve touching another person, it is less intimate and usually has the function of helping with personal presentation.'

Personal care tasks specifically identified as relevant include:

- feeding
- administering oral medication
- hair care

- dressing and undressing (clothing)
- washing non-intimate body parts
- prompting to go to the toilet
- Skin care/applying creams

All children have the right to be safe and to be treated with dignity and respect.

Children's intimate care needs cannot be seen in isolation or separated from other aspects of their lives. Encouraging them to participate in their own intimate or personal care should be part of a general approach towards facilitating participation in daily life.

Disabled children can be especially vulnerable. Staff involved with their intimate care need to be sensitive to their individual needs. Adhering to the settings policy and procedure guidelines should safeguard children and practitioners.

## Safeguarding

Staff at Puttenham have agreed that one member of staff will change the child, whilst another member of staff is in attendance if required or agreed by the Headteacher. All staff and volunteers appointed at Puttenham CofE Infant School must have the required DBS and enhanced checks which are carried out to ensure the safety of children and staff. The Headteacher will:

- ensure that staff are suitably checked (DBS) and that safer recruitment processes have been adhered to
- ensure that all staff are aware of the recording requirements if changing nappies and/or toileting
- ensure all staff follow setting procedures/guidelines for intimate care
- carry out a risk assessment of the toileting process and areas used
- consider if a child soils themselves then what additional support may the child and staff
- ensure that staff involve the child as far as possible in his or her own intimate care
- ensure other staff are aware of the task being undertaken
- ensure staff are familiar with the settings safeguarding policy including the section on allegations against staff
- ensure staff are aware that it is essential that the adult who is going to change the child informs another member of staff that they are going to do this
- ensure all staff are up to date with their safeguarding training.

If it is a one-off need to carry out intimate care this can be recorded on the form in back of the incident book in the office (Appendix 2.) If it is a long term issue this will be discussed with the parents and a care plan will be discussed with the parents, the SENco, the Headteacher and/or the class teacher (Appendix 1).

If a staff member has concerns about a colleague's intimate care practice they must report this following the setting's whistleblowing policy.

## **Health and Safety**

These guidelines aim to manage risks and ensure that employees do not work outside the remit of their responsibilities. It is essential that all staff follow the guidance set out in this policy, the infection control and the Health and Safety policy, and take all reasonable precautions to prevent or minimise accident, injury, loss or damage. It is of particular importance with regard to regular intimate and personal care are the following:

- staff training
- the recording of activities as necessary
- consent being obtained from parents/ carers
- the risk assessment and Educational Health Care Plan being written with, and signed by parents/carers
- The presence of two adults when invasive medical procedures are performed unless the parents/carers have agreed to the presence of one adult only
- staff to wear fresh disposable aprons and gloves while changing a child
- soiled nappies/pull ups securely wrapped and disposed of appropriately
- changing area/ toilet to be left clean after use
- hot water and soap available to wash hands as soon as changing is done
- paper towels to be available to dry hands.

Intimate care can also take substantial amounts of time but should be an enjoyable experience for the child and for their parents. It is essential that every child is treated as an individual and that care is given as gently and as sensitively as possible. Children should be treated with dignity and respect and given privacy appropriate to the child's age and situation. The child should be encouraged to express choice and to have a positive image of his/her body. Confident, self-assured children who feel their body belongs to them are less vulnerable to sexual abuse.

Intimate care arrangements must be agreed by the setting, parents and child (if appropriate), and be recorded in the child's personal file and consent forms signed by the parents and child (if appropriate). If it is an isolated accident in which intimate care is needed staff need to notify parents on the same day and write a log in the incident book (Appendix 1)

Practitioners should not undertake any aspect of intimate care that has not been agreed between the setting, parents and child (if appropriate). Settings need to make provisions for emergencies i.e. a key person on sick leave. Intimate care arrangements should be reviewed at least six monthly. The views of all relevant parties, including the child (if appropriate), should be sought and considered to inform future arrangements.

Intimate care may involve touching the private parts of the child's body and therefore may leave staff more vulnerable to accusations of abuse. It is unrealistic to eliminate all risk but this vulnerability places an important responsibility on staff to act in accordance with agreed procedures. Intimate care must never be undertaken in a locked room.

If you observe any unusual markings, discolourations or swelling including the genital area, report immediately following the Child Protection and Safeguarding policy and procedures. If during the intimate care of a child you accidentally hurt them, misunderstand or misinterpret something, reassure the child, ensure their safety and report the incident immediately following your settings policy and procedures. Report and record any unusual emotional or behavioural response by the child. A written record of concerns must be made and kept in the child's personal file.

### **Training**

The requirement for staff training in the area of intimate/personal care will be largely influenced by the needs of the children/young people for whom staff have responsibility. Consideration should be given, however, to the need for training on a whole school or setting basis and for individual staff who may be required to provide specific care for an individual child/young person or small number of children/young people. Whole staff group training should provide staff with opportunities to work together on the range of issues covered within this document thus enabling the development of a culture of good practice and a whole school or setting approach to personal care. Whole school or setting training should provide disability awareness, and opportunities for staff to increase knowledge and enhance skills. More individualised training will focus on the specific processes or procedures staff are required to carry out for a specific child/young person. In some cases, this may involve basic physical care which might appropriately be provided by a parent or carer. In cases of medical procedures, such as catheterisation, qualified health professionals should be called upon to provide training. Designated staff may require training in safe moving and handling. This will enable them to feel competent and confident and ensure the safety and well-being of the child/young person. It is imperative for the school and individual staff to keep a dated record of all training undertaken. For any child/young person requiring intimate or personal care, it is recommended as good practice that this be discussed with the school nursing or health visiting service.

This policy has been written following the guidance in Surrey's policy,' 'Toileting and Intimate Care Policy 2015" This policy must be read in conjunction with our school's Child Protection and Safeguarding Policy, Health and Safety, 'Touch and the use of Restrictive Physical Intervention, Equal Opportunities and Accessibility Plan. These are available from the school office or on our website.

Signed	Date

(Chair of Local Committee)

**Date agreed:** 



**Childs name:** 

# Personal/Intimate Care Plan at Puttenham CofE Infant School

## Record of discussion with parents/carers

Date of birth:

Working towards independence: Such as taking child/young person to toilet at timed intervals, using sign or symbol, any rewards used Arrangements for changing: Such as who, where, arrangements for privacy  Level of assistance needed: Such as undressing, dressing, hand washing, talking/signing to child Infection control: Such as wearing disposable gloves, nappy disposal Sharing information: Such as if the child/young person has a nappy rash or any marks, any family customs/cultural practice Resources needed: Such as special seat, nappies/pull-ups, creams, disposable sacks, change of clothes, toilet step, gloves Language to be used: To agree terminology for parts of the body and bodily functions so that a common language is shared between home and school  Review date:  Review date:  Review date:				
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# Record of intimate/personal care

Child's name	Date	Time	Place	Procedure	Comments	Signature