



INTIMATE CARE & TOILETING POLICY

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1. Introduction

Green Lane Primary Academy 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 Policy and Guidelines regarding children have been developed to safeguard children and staff. They apply to everyone involved in the intimate care of children.

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.

2. Aims and Objectives

This policy aims:

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

3. 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 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 successfully, including dressing and undressing and going to the toilet independently". Parents need to be aware of their responsibilities (see section 5). Toilet accidents are recorded on CPOMS and a toileting slip is sent home.

4. Intimate Care in Key Stage 1 and Key Stage 2

Key Stage 1 - We will change children for odd 'accidents' but not routinely as part of day to day personal care (unless the child has additional needs). Parents will be informed at the end of the day that this has occurred. We may contact home earlier and request parents to collect if we feel the child requires a more thorough wash. Toilet accidents are recorded on CPOMS and a toileting slip is sent home.

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 (junior's toilets) where the child may change on their own. We will supply wipes, clean clothes (to the best of our ability out of the 'spares box') and a carrier bag. Parents may be contacted to request that the child is collected if we feel a more thorough wash is required. Toilet accidents are recorded on CPOMS.

5. Parental responsibility

Partnership with parents is an important principle in any educational setting and is particularly necessary in relation to children needing intimate care.

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 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 before starting school.
- Parents accept that if a child has a bowel accident at school, parents will be asked to come and collect their child to wash and change them.

6. 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. 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
2. Escort the child to a changing area i.e. designated toilet areas
3. Collect equipment and clothes
4. Adult to wear gloves
6. Child to undress as appropriate and clean themselves as much as possible under the verbal guidance of an adult.
7. 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.

8. Children are expected to dress themselves in clean clothing, wash their hands and return to class, assistance will be given if a child is unable to do this and the parents informed.

9. Adult should wash their hands thoroughly after the procedure.

10. Area to be cleaned by adult before returning to class.

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 support teachers regularly leaving the class to attend to an individual's hygiene.

8. Special educational needs and child protection issues

The school recognises that some children with SEN 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 2001 & Part 1V of the disability Discrimination Act 1995.

If a child's toileting needs are substantially different than those expected of a child his age, then the child's needs may be managed through an Individual Health 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 Co-ordinator, teaching staff and parents would seek further support, e.g. G.P.'s referral of child for specialist assessment.

Some children may have an Education Health and Care Plan before entering school. This will outline the child's needs and objectives and the educational provision to meet these needs and objectives. The statement 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.

9. Child Protection

Careful consideration will be given to individual situations to determine how many adults should be present during intimate care procedures. 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 taken into account 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. 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.

This policy was adopted by the Governing Body on _____

It will be reviewed by July 2017.

Chair of governors _____

Headteacher _____