



Policy for Intimate Care and Toileting

March 2021

Mission statement:

“Enjoy, learn, achieve”

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1. INTRODUCTION

1.1 The Intimate Care Policy and Guidelines applies to everyone involved in the intimate care of children at Grove school.

1.2 These guidelines should be read in conjunction with other policies, for example:

Safeguarding and Child Protection Policy

Health & Safety Policy

Safer Recruitment Policy

Special Educational Needs Policy

1.3 The term parent/s is used to refer to parents, carers and legal guardians.

2. DEFINITION OF INTIMATE CARE

2.1 Intimate care is any care which involves washing, touching or carrying out an invasive procedure that most children carry out for themselves but 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.

Care may involve help with drinking, eating, dressing and toileting.

2.2 In most cases intimate care will involve procedures to do with personal hygiene and the cleaning of equipment associated with the process.

3. AIMS

3.1 The aims of this policy and guidance are;

- To provide guidance for staff
- To safeguard the dignity, rights and well being of children at Grove school
- To assure parents that staff are knowledgeable about intimate care and that the individual needs of their child and parental concerns are taken into account.

4. PRINCIPLES

- Every child has the right to feel safe and secure
- Every child has the right to be treated as an individual
- Every child has the right to remain healthy
- Every child has the right to privacy, dignity and a professional approach from all staff when meeting his or her needs
- Every child has the right to be accepted for who they are, without regard to age, gender, ability, race, culture or beliefs

5. WORKING WITH PARENTS

5.1 Partnership with parents is a vital principle in any educational setting and is particularly necessary in relation to children needing intimate care. Much of the information required to make the process of intimate care as comfortable as possible is available from parents, including knowledge and understanding of any religious or cultural sensitivities.

5.2 Prior permission must be obtained from parents before intimate care procedures are carried out.

5.3 Parents should be encouraged and empowered to work with staff to ensure their child's needs are identified, understood and met. This will include involvement with Individual Health Care Plans (IHCP) and any other plans that identify the need to support of intimate care, for instance an Education Health and Care Plan (EHCP).

5.4 Exchanging information with parents is essential through verbal contact made via telephone or written correspondence. Recording equipment such as mobile phones or cameras must not be taken into areas where intimate care is carried out.

6. WRITING AN INTIMATE CARE PLAN

6.1 Where a routine procedure is required an intimate care plan should be agreed in discussion with the child, school staff, parents and relevant health personnel. The plan should be signed by all who contribute and reviewed on an agreed basis.

6.2 In developing the plan the following should be considered:

- Staff ratios and procedures
- Toilet arrangements and equipment (e.g. spare clothes and disposable gloves)
- Awareness of a child's discomfort which may affect learning
- The importance of working towards independence

6.3 All plans must be clearly recorded to ensure clarity of expectation, roles and responsibilities. They should reflect all methods of communication including emergency procedures between home, school and, if required, the medical service.

LINKS WITH OTHER AGENCIES

7.1 Grove school may consult with the school nurse service and agency professionals who support pupils who have special educational needs

8. PUPIL VOICE

8.1 Allow the child, subject to their age and understanding, to express a preference regarding the sequence of care.

8.2 Agree appropriate terminology for private parts of the body and functions to be used by staff.

8.3 It may be possible to determine a child's wishes by observation of reactions to intimate care.

8.4 Where there is any doubt that a child is able to make an informed choice on these issues, the child's parents are usually in the best position to act as advocates.

8.5 It is the responsibility of all staff caring for a child to ensure they are aware of the child's method and level of communication. Communication methods may include words, signs, symbols and body movements.

8.6 To ensure effective communication with the child, staff should ascertain the agreed method of communication and identify this in the agreed Intimate Care Plan.

9. RECRUITMENT

9.1 Recruitment and selection of all candidates for all teacher and teaching assistant posts at Grove school follows the DBS procedure, equal opportunities and employment rights legislation, and with regard to guidance and legislation detailed in Safeguarding Children and Safer Recruitment in Education .

9.2 At least one person on each interview panel is accredited in safer recruitment.

9.3 Enquires should be made into any restrictions the candidates may have which will impede their ability to carry out the tasks involved. This will enable employers to identify and provide necessary support and adjustments that are practical.

10. STAFF DEVELOPMENT and TRAINING

10.1 Staff must receive Safeguarding and Child Protection training every year.

10.2 Staff working with pupils who require support with intimate care must be trained in the specific types of intimate care that they carry out and fully understand the intimate care policy and guidelines within the context of their work.

10.3 Whole school staff training should foster a culture of good practice and a whole school approach to intimate care.

Leaders should be able to:

- Ensure that sensitive information about a child is only shared with those who need to know, such as parents, members of staff specifically involved with the child. Other personnel should only be given information that keeps the child safe.
- Consult parents about arrangements for intimate care
- Ensure staff are aware of all appropriate procedures
- Ensure staff know who to ask for advice if they are unsure or uncomfortable about a particular situation.
- Ensure staff know of a whole school approach to intimate care

In addition, staff members should be able to:

- Identify and use a communication system that the child is most comfortable with.
- 'Read' messages a child is trying to convey
- Communicate with and involve the child in the intimate care process
- Offer choices, wherever possible
- Develop, where possible, greater independence with the procedure of intimate care
- Maintain confidentiality with children who discuss elements of their intimate care unless it is a child protection issue when Child Protection procedures must be followed.

11. ENVIRONMENTAL ADVICE

11.1 When children need intimate care facilities, reasonable adjustments will need to be made.

11.3 Additional resources include:

- Protective clothing including disposable protective gloves, disposable aprons, cleaning materials
- Labelled bins for the disposal of wet & soiled nappies
- Supplies of suitable cleaning materials; anti-bacterial spray, sterilising fluid, deodorisers , Anti-bacterial hand wash
- Supplies of appropriate clean clothing, nappies, disposal bags and wipes
- Changing mat or changing bench

12.2 Ensure that there is always a second member of staff nearby or within earshot, when intimate care takes place.

13. VULNERABILITY TO ABUSE

Children should be encouraged to recognise and challenge inappropriate assistance and behaviour that erodes their dignity and self worth. Staff should be encouraged to listen.

13.1 It is essential that all staff are familiar with the school's Safeguarding and Child Protection Policy and procedures.

13.2 The following are factors that can increase a child's vulnerability:

- Children with disabilities may have less control over their lives than others
- Children may experience multiple carers
- Children may not be able to distinguish between intimate care and abuse
- Children may not be able to communicate

13.3 If a child is hurt accidentally , he or she should be immediately reassured and the adult should check that he or she is safe and the incident reported immediately to the head teacher, P Matty

14. SAFEGUARDING AND ALLEGATIONS OF ABUSE

14.1 It is essential that all staff are familiar with the school's Child Protection and Safeguarding Policies and procedures.

14.2 If a child is hurt accidentally , he or she should be immediately reassured and the adult should check that he or she is safe and the incident reported immediately to the head teacher, Mrs P Matty

14.3 If a child misunderstands or misinterprets an action / instruction, the incident should be reported immediately to the head teacher, Mrs P Matty

14.4 Staff working in intimate situations with children can feel particularly vulnerable.

14.5 Action should be taken immediately should there be a discrepancy of reports between a child and the member of staff particularly with reference to time spent alone together.

14.6 It is advised that the member of staff be changed as quickly as possible, should such a discrepancy occur, and then reviewed on a regular basis.

14.7 Where there is an allegation of abuse, the guidelines in the Child Protection procedures should be followed.

15. TOILETING PROCEDURES

15.2 Working with Parents

Working in partnership with parents is a vital to ensure the intimate care and toileting needs of pupils are understood. Exchanging information with parents is essential; parents should be encouraged and empowered to work together with staff to ensure a consistent approach.

15.4 Staff Development and Training

Staff must receive Safeguarding and Child Protection training every year (Designated Safeguarding Leads' training is reviewed every 2 years).

All staff should be able to:

- Access documents that support the welfare of the child. These would be an Education Health Care Plan, an Individual Health Care Plan and/or an Intimate Care Plan (ICP)
 - Understand and use a communication system that the child is most comfortable with
- 'Read' messages the child is trying to convey
- Communicate and involve the child in the toileting programme
- Offer choices, wherever possible
- Develop, where possible, greater independence
- Maintain confidentiality with children unless it is a child protection issue when Safeguarding Procedures must be followed

15.5 Environmental Advice

Grove school ensures that toilet facilities are easily accessible and well maintained to promote children's awareness of good hygiene practices and developing independence.

15.6 Toileting and changing procedures

- Teachers and teaching assistants are aware of the children in their care who are in nappies or 'pull-ups' and those children who may have occasional accidents. This information is obtained from parents/carers when a child joins the EYFS or school
- Children can wear 'pull-ups' or other types of training pants
- Children who need support with changing are supported in the nursery toilets. The nursery toilets are inside the nursery and are self - contained. The resources used by staff for changing children are stored in this space
- Where there is a toileting accident and a child needs support with changing the school resources will be used
- 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 staff are familiar with our hygiene procedures and carry these out when changing nappies.
- Staff never turn their back on a child or leave them unattended whilst they are on the changing mat. The changing mat is laid on the floor. This is for safety. We do not use a changing table
- Staff are gentle when changing; we avoid pulling faces and making negative comments about 'nappy contents'
- When a toileting accident occurs, and a pupil needs support with changing the member of staff will talk a pupil through what they need help with. This is the support we offer pupils whose cognition and self - help skills mean they can understand. For example, with a Year 1 pupil the member of staff may say, first take your tights/trousers off, put them in the bag. The member of staff would guide a pupil through the changing where appropriate.
- If a toileting accident occurs, we may contact a parent/carer to come into school to support their child if we assess the child needs their parent/carer and/or the child may need to be

washed/bathed/showered. We do not have these facilities on the school site and to leave a child feeling unclean would not meet the needs of the child.

In Early Years Foundation Stage teachers and teaching assistants are supporting all pupils to achieve the Early Learning Goal: Managing Self Care. Through the EYFS curriculum all staff working with children support them in managing their own basic hygiene and personal needs, including dressing, going to the toilet and understanding the importance of healthy food choices.

At Grove staff:

Encourage children to take an interest in using the toilet.

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.

Organise the day in nursery and reception with regular toilet visits as part of the daily routine until the group/class are confident in saying when they need the toilet and can independently use the toilet

Dispose of nappies and pull ups hygienically. Any soil (faeces) in nappies or pull ups is flushed down the toilet and the nappy or pull up is bagged and put in the bin. Cloth nappies, trainer pants and ordinary pants that have been wet or soiled bagged for parents to take home

16.0 Intimate Care Plans

A child who requires changing and whose parent has agreed an Intimate Care Plan will have a bag which is collected before changing so their nappies, pull ups and changing wipes are to hand.

16.1 Intimate Care Plan agreements: In these circumstances it may be appropriate to set up an agreement that defines the responsibilities that each partner has, and the expectations each has for the other.

This will include:

16.2 The parent:

- agreeing to ensure that the child is changed at the latest possible time before being brought to school
- providing the school with spare nappies or pull ups and a change of clothing
- understanding and agreeing the procedures that will be followed when their child is changed at school –including the use of any wipes
 - agreeing to inform the school should the child have any marks/rash
 - agreeing to a 'minimum change' policy i.e. the school would not undertake to change the child more frequently than if s/he were at home.
- agreeing to review arrangements should this be necessary for instance if the child is distressed when staff change the child

16.3 The school:

- agreeing to change a child should the child soil themselves or become uncomfortably wet
- agreeing how often a child would be changed
- agreeing to monitor the number of times the child is changed in order to identify progress made
- agreeing to report should the child be distressed, or if marks/rashes are seen
- agreeing to review arrangements should this be necessary or deemed not to be in the child's best interests due to the child exhibiting high levels of upset or distress

Grove school

Intimate Care Plan

Name of child:

Name of person(s) to change the child:

Name of other person(s) to change the child:

Where changing will take place:

What resources and equipment will be used:

What visual symbols will be used:

What words/phrases 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:

If the child is unduly distressed, a member of staff will contact the parent/carer.

This Intimate Care Plan has been agreed by the parent and school.

Name of parent:

Signature:

Date:

Name of leader at Grove who has agreed the plan:

Signature:

Date: