



#### Aspire, Nurture, Enjoy and Flourish in the Love of God

'Be strong and courageous. Do not be afraid. Do not be discouraged, for the Lord your God will be with you wherever you go.' Joshua 1:9

Policy	Intimate Care Policy
Date	September 2022
Date for next review	Autumn 2023
Summary	The policy has been prepared to support all staff to ensure that we value everyone and have equality in practise.

We service our community by providing an education of the highest quality. We believe our school should be a place where we all want to be; a place where children and adults feel safe, happy, secure and nurtured.

Our high expectations for learning cultivates character and pride in our identity at St Michael's CE School preparing every child for their future.





# Intimate Care Policy

This policy sets out the school's commitment to supporting children and staff dealing with intimate care and the ways in which to fulfil its legal and moral obligation to those children and families.

St Michael's is committed to ensuring that all staff responsible for the intimate care of children will always undertake their duties in a professional manner.

This policy supports the safeguarding and welfare requirements of Early Years Foundation Stage (EYFS) 2017 and Keeping Children Safe in Education 2020.

We 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
- No child will be sent home or have to wait for their parents/carer due to incontinence
- Adjustments will be made for any child who has delayed incontinence

We recognise that there is a need to treat all our children with respect when intimate care is given. No child should be attended to in a way that causes distress or pain, and adults and staff must be sensitive to each child's individual needs. Intimate care is any care which involves one of the following:

- 1. Assisting a child to change his/her clothes
- 2. Changing or washing a child who has soiled him / herself
- 3. Assisting with toileting issues
- 4. Supervising a child involved in intimate self-care

5. Carrying out a procedure that requires direct or indirect contact to an intimate personal area e.g. facilitating changing of medical devices and in accordance with their care plan.

#### Partnership with Parents/Carers

Staff at St Michael's will work in partnership with parents/carers to provide care appropriate to the needs of the individual child and together will produce a care plan. (See 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, 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 can do by themselves
- Acknowledge and 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

## Parents/Carers are asked to supply the following:

- Spare nappies/pull ups
- Wipes, creams, nappy sacks etc.
- Spare clothes
- Spare underwear

**Best Practice –** When intimate care is given, the member of staff explains fully 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. **If staff are concerned in any way, parents will be sent for and asked to** 

assist their child and informed if the child becomes distressed.

**Dealing with bodily fluids** – Urine, faeces, blood and vomit will be cleaned up immediately and disposed of safely. When dealing with bodily fluids, staff will wear disposable plastic gloves and will wash their hands thoroughly afterward.

Soiled children's clothing with be bagged to go home. Staff will not rinse it. Children will be kept away from the affected area until the incident has been completely dealt with.

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

This policy aims to manage risks associated with toileting and intimate care needs and ensures that employees do not work outside the remit of their responsibilities set out in this policy.

#### WETTING/SOILING

There are occasions when a child may wet or soil themselves at school. Whilst there is no compulsion on the school to deal with a problem of this nature the school will never leave a child in this condition if possible.

In the event of this type of accident the school will take the following steps:

- Where appropriate the child will sort the problem themselves.
- Where possible children will change into their PE kit.





- If necessary, the parent/carer will be contacted to come into school and support their child to change.
- If no-one can be contacted two volunteer members of staff will be requested to help the child. Parents will be informed of this.
- If the problem is consistent then a meeting may be required between the AHT for Inclusions and the parent/carer.

In Nursery and Reception classrooms, children have access to their own toileting facilities, and we teach the children the importance of hygiene and hand washing techniques.

In the event of a toileting accident in one of the early years classes we will take the following steps:

• Where appropriate the child will be encouraged to sort the problem out themselves with adult supervision.

Or

• Two members of staff will help and clean the child if this is needed. Parents are to be informed at the end of the school day if this has occurred.

Parent/carer will always be contacted when their child has had an accident. Depending on the severity of the accident parents/carers may be asked to come to school and support their child to change and/or take them home.

#### **Monitoring**

This policy will be reviewed and approved by the Local Academy Board every year or sooner if guidance changes. The policy is regularly monitored by the Local Academy Board. At every review, the policy will be shared with the Local Academy Board.

This policy can also be read in conjunction with:

- Teaching and Learning
- Accessibility Plan
- EYFS Policy
- SEND Policy





# Appendix 1

### PERSONAL CARE PLAN For children wearing nappies/pull-ups/regularly soiling in school

Child's Name						
Date of Birth	Age					
Gender:   Male  Female						
Class	Class Teacher					
Completed by:	(member of staff)					
Date of plan:	Date to review plan:					
Type of care required						
<ul> <li>Nappy changing</li> <li>Pull ups</li> <li>use the toilet</li> </ul>	s changing					
<ul> <li>Assistance to change clothes after soiling</li> </ul>						
Other, please state:						
Who will change the child?						
If more than one, state why:						
How will the child be changed? Example, standing up in a toilet cubicle, lying down on a mat on the floor						
Additional equipment required						
□ No □ Yes Please state:						
Who will provide the resources?						
Nappies	ichool					
Pull ups	chool					





Nappy sacks		Parents		School
Wipes		Parents		School
Disposable gloves		Parents		School
Spare clothes		Parents		School
Spare underwear		Parents		School
How will the changi communicated to cl				recorded and if/ how this will be er?
Agree a minimum n	um	ber of cha	inge	es
the child do for ther	nse	elves?)		participate in the procedure? (What can
Any other comment information	s/ i	mportant i	nfo	rmation, e.g. medical, religious or cultural

This plan has been discussed with me and I agree to change my child at the last possible moment before he/she comes to school, provide the resources indicated above and encourage my child's participation in toileting procedures at home as appropriate and where possible.

Signed:

Parent/ Carer's Full Name:





#### Appendix 2 Record of Intimate Care Intervention Form

Child's Name: \_\_\_\_\_

Class:\_\_\_\_\_ Sheet No: \_\_\_\_\_

Date Time		Care/Intervention undertaken	Concerns	Signature of staff member	Print name





# Appendix 3

# TOILET TRAINING SUPPORT PLAN

### Ideas to help children with toilet training

Toilet training can be a difficult skill to master for any child. Young children do not usually feel the desire to become toilet trained, rather they acquire the skill to please their parent, so this social motivation is a critical factor.

For children with social awareness difficulties the social motivation for toilet training is rare. Equally, due to understanding difficulties, the child may not understand what is being expected of them. Organising and sequencing the information needed to follow the steps in toileting and staying focused on the task can also be a big problem. The child may have problems changing from familiar nappies to unfamiliar pants. An additional problem for some children may be the difficulty in integrating sensory information and establishing the link between having the sensations and what they need to do as a result. Also, for those with a heightened awareness of sounds the sound of running water may be frightening, as may be the big hole in the toilet seat with water beneath. Children who respond badly to changes in temperature and to removing clothes or replacing them may also have difficulties with toilet training.

#### WHAT TO DO

- Discuss with parents/carers and agree a plan of action that is relevant at both the child's home and in the school/early years setting.
- Identify a suitably motivating reward that is practical for the child's home or setting to use or carry; make sure all rewards are available instantly when required.
- Use a simple chart to collect information about the child's readiness for toilet training. Take the child to the toilet/potty to check every hour and record if they use the toilet/potty and if they are dry/wet/dirty before. Do this for a week, if possible, to try to establish a pattern.
- Think ahead and plan to start the above in a week when you know that you will have the time to continue it without causing you problems. If you are stressed at trying to find the time, your child is likely to become anxious as well.
- If during the week you start picking up signs of when the child is wetting or soiling themselves then tell them to 'wait' then take them to the potty/toilet even if it is too late. This will help to establish the relationship between what the child is feeling and what should happen next.
- If the child is dry for 2 hours or more at a stretch this indicates that the child is physically ready to be toilet trained, ie, the muscles have developed control.
- During the week observe whether the child is beginning to follow, or seems to be aware of, any part of the routine.
- Find a realistic goal having observed and assessed where the child is in understanding the toileting process independent toileting may be many steps away.





- Establish a positive and meaningful routine around toileting
  - Break down the toileting routine into small steps: e.g.
    - 1. Enter the bathroom,
    - 2. Pull clothes down by self or allows adult to pull
    - 3. Sit on toilet/potty
    - 4. Eventually for boys stand at the toilet and control penis
    - 5. Get tissue
    - 6. Wipe with tissue
    - 7. Stand up
    - 8. Throw tissue in toilet
    - 9. Pull clothes up
    - 10. Flush toilet
    - 11. Wash hands
    - 12. Leave bathroom.
- Keep to the routine that you set up to give continuity whilst your child is learning. Changes in routine can seem like a new activity to some children.
- It can be useful to only undertake toilet training in a set room to build up the association with one place e.g., the bathroom.
- It may be necessary to add support for feet etc. to give security to the child when seated.
- If sounds in the room cause problems, try playing favourite music whilst the child is in there to reduce anxiety.
- Once you have decided on your goal consider whether visual prompts would help to keep the child focused on the task.
- An object or a picture may be needed to help the child realise what is to happen. For some children it may be necessary to have a series of pictures relating to each step of the process with a visual cue for what activity is to follow. Use this reward as a motivator by choosing an activity that the child enjoys.
- To help the child know how long to sit, you can try a timer or a song/tune on the music player.
- If the child is afraid of the flush, only flush if there is something to flush or flush once the child has left the room. This can be changed to when the child is at the door or away from the toilet as the fear subsides. Try allowing the child to work the flush.
- Some children, who love the flush or the water in the toilet, need to be distracted from this with interesting toys, etc.
- Children who play with the toilet roll could try having a visual cue, e.g. a peg placed where to tear or a line marked on the wall for where to stop. Build this into your toileting routine. Alternatively roll out the amount of paper needed ahead of time.
- If the child resisted being cleaned, try using different materials and consider the temperature of the materials that you are using. If it helps distract with a favourite doll/soft toy.
- When the child is ready to initiate the toilet routine find a way for the child to show you their need. If you used an object or picture, it may be meaningful for the child to point to this or to bring it to you. Always use speech alongside the object/picture for when the child can make their needs known verbally.