

## **General Principles**

- Every intimate care procedure must be completed within an atmosphere of total respect and dignity both for the individual receiving care and for the person involved in giving the care.
- Every plan supporting intimate care must demonstrate how the child can be enabled to develop their independence as far as is reasonably practical for the child.
- The number of adults engaged in the care should only reflect the minimum needed to perform the task safely and respectfully. Each situation should reflect both the safety and vulnerability of children and staff
- DRAGrange Primary School places the highest importance on safeguarding.
  We are committed to ensure that staff responsible for intimate care will undertake their duties in a professional manner at all times.

#### **Definition**

Intimate care is defined as any care which involves washing, touching, or carrying out an invasive procedure that most people carry out for themselves, but which some are unable to do. Intimate care tasks are associated with bodily functions, body products and personal hygiene that demand direct or indirect contact with, or exposure of, the genitals. Some examples include support with dressing and undressing (underwear), changing incontinence pads and nappies, assisting someone in use of the toilet or in washing intimate parts of the body. Pupils with a disability may be unable to meet their own care needs for a variety of reasons and will require regular support.

# Responsibilities

We recognise our duties and responsibilities in relation to the Disability Discrimination Act which requires that any child with an impairment that affects his/her ability to carry out normal day-to-day activities must not be discriminated against. We recognise that there is a need for children and young people to be treated with respect when intimate care is given.

No child shall be attended to in a way that causes distress, embarrassment or pain. Grange staff work in close partnership with parents and carers to share information where appropriate and provide continuity of care.

### **Toileting**

In order to help children to become aware of their bodily needs and respond to them in time, children in the Early Years Foundation Stage are always allowed to use the toilet and are reminded to go at various times in the school day.

Children in Key Stage One, are encouraged to use the toilet during break times, but are allowed to visit whenever they want, whilst being taught to ask at appropriate times.

In Key Stage Two, the vast majority of children are expected to use the toilet during break times only, in order to reduce disruption to learning. All Key Stage One or Two children using the toilets during class time are sent out in twos to ensure safety.

The school undertakes to attempt to provide any support requested by a child's GP, medical consultant, the school nurse and parents/carers.

It is a general expectation that most children are toilet trained and out of nappies before they begin school or nursery. However it is inevitable that from time to time some children will have accidents and will need to be attended to. In addition to this, some pupils with disabilities and medical conditions are educated in mainstream settings such as Grange. A significant number of these pupils may require adult assistance for their personal and intimate care needs.

#### **Intimate care**

Should an accident occur, children are encouraged to do as much as they can for themselves, under adult supervision. Wipes are available for children to use and there are generally spare clothes kept at school, for younger children. Parents of children with known medical or impairment needs are asked to give permission for children to be changed as they enter school. Where a child has continuing incontinence problems, parents are expected to provide sets of spare clothes. In a small minority of cases, parents will also be asked to provide nappies or incontinence pads. Communication routines will be established between home and school in order that parents are informed when a child has had to be changed and soiled clothes are returned home as soon as possible. Where the school has sent a child home in spare clothes, it is expected they will be returned to school after they have been washed.

If a child soils him/herself during school time, one member of staff will help the child by encouraging them:

- To remove their soiled clothes
- To clean their skin (this usually includes bottom, genitalia, legs, feet)
- To dress in the child's own clothes or those provided by the school
- To double wrap soiled clothes in plastic bags and give to parents to take home.

Should the child need adult support to carry out any of these tasks, another adult will be present, or at least aware of what is going on, to ensure safeguarding routines are adhered to. Staff would usually only clean a child's genitalia if the child has a disability and/or is too young to do this themselves. This would always be done with another adult present for safeguarding reasons.

Where possible, a mobile child will be changed when standing up in a toilet cubicle. For children with disabilities who require a changing mat, there is one in the disabled toilet.

At all times staff pay full attention to the level of distress and comfort of the child. If the child is ill, parents/carers are contacted to collect their child. In the event of a child being reluctant or refusing to be changed, the parent/carer will be contacted immediately and their support will be sought.

Our intention is that a child will never be left in soiled clothing. As soon as the member of staff responsible for him/her is aware of the situation, she/he will support the child's cleaning of themselves or, as outlined above, clean the child with another adult present, or support the child's cleaning of themselves. The member of staff responsible will check the child regularly and ensure that he/she is clean before leaving to go home.

We believe that the child should not experience any negative disciplining or comments in this context, but only positive encouragement and praise for his/her endeavours to master the necessary skills.

### Hygiene

Early Years Foundation Stage pupils have access to their own toilet area with washing facilities.

Staff have access to warm water and changing facilities within the disabled toilet on the ground floor. The correct waste disposal bin is in the disabled toilet. Soiled nappies and/or pull ups should be securely wrapped and disposed of appropriately. There is a stock of baby wipes, plastic bags, disposable aprons and disposable protective gloves available in the Foundation Stage classrooms and the admin office for staff to use.

It is imperative that staff use a fresh disposable apron and gloves while changing a child.

The changing area/toilet must always be left clean.

Any mess or spillage must be reported to office and premises staff in order that the area can be cleaned immediately.

Hands must be washed in hot water with soap as soon as changing is done. Paper towels should be available to dry hands.

The school makes appropriate arrangements for the disposal of soiled nappies.

### Pupils with ongoing medical toileting needs

The management of all children with intimate care needs will be carefully planned. Where specialist equipment and facilities are recommended following assessment by a Physiotherapist and/or Occupational Therapist, we will endeavour to provide these facilities or equipment.

We communicate carefully with any pupil who requires intimate care in line with their preferred means of communication to discuss needs and preferences. Staff will be supported to adapt their practice in relation to the needs of individual children, taking into account developmental changes such as the onset of puberty and menstruation. Pupils will be supported to achieve the highest level of independence possible according to their individual condition and abilities. Where necessary, care plans will be drawn up, giving consideration to this on an individual basis.

Careful consideration will be given to individual situations to determine how many adults should be present during intimate care procedures. A pupil will be cared for by two adults. In an emergency case where it is impossible for two adults to be present, the reasons will be documented.

We will discuss intimate care arrangements with parents/carers on a regular basis and record changes on the care plan. The needs and wishes of children and parents will be taken into account wherever possible, within the constraints of staffing and equal opportunities legislation.

Where a care plan is not in place and a child has needed help with intimate care (in the case of a toilet 'accident') then parents/carers will be informed the same day. This applies to all children.

This information should be treated as confidential and communicated in person, via telephone or by sealed letter.

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It will be reviewed in three years, unless there are reasons for adaptations before then.

| Signed      | <br> | <br> |
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