



Intimate Care Policy.

This policy is for Barleyhurst Park School and Barleyhurst Park Nursery.

Agreed by Governors: 29.02.2024

To be reviewed: Spring 2025

Introduction:

Barleyhurst Park Primary School and Nursery both aim to support children's care and welfare on a daily basis in line with their individual needs. All children need contact with familiar, consistent carers to ensure they can grow confidently and feel self-assured. At times, young children need to be encouraged and offered physical reassurance.

Aims:

We aim to:

- To safeguard the rights and promote the best interests of the children;
- To ensure children are treated with sensitivity and respect, and in such a way that their experience of intimate care is a positive one;
- To safeguard adults who are required to operate in sensitive situations;
- To raise awareness and provide clear procedures for intimate care.

This policy sets out clear principles and guidelines on supporting intimate care with specific reference to toileting. This Intimate Care Policy should be read in conjunctions with:

- Safeguarding and Child Protection Policy;
- Special Educational Needs and Disability Policy;
- Supporting Pupils at School with Complex Medical Conditions Policy;
- Health and Safety Policy.

This policy supports the safeguarding and welfare requirements of the Early Years Foundation Stage.

The Governing Board will act in accordance with Section 175 of the Education Act 2002 and Keeping Children Safe in Education (2023) to safeguard and promote the welfare of pupils at this school. Barleyhurst Park Primary School and Nursery take seriously its responsibility to safeguard and promote the welfare of the children and young people in its care. Meeting a **pupil's intimate care needs is one aspect of safeguarding. The Governing Board recognises** its duties and responsibilities in relation to the Disability Discrimination Act 2005 which requires that any child with an impairment that affects his/her ability to carry out day-to-day activities must not be discriminated against.

We work with parents towards toilet training unless there is a medical or other developmental reason why this may not be appropriate at the time. We see toilet training as a self-care skill that children have the opportunity to learn with the full support and non-judgmental concern of adults. The school will share the policy and procedures for dealing with **children's general toileting needs with parents or carers. It is important that there is a** positive dialogue between home and school about strategies in use with the child so that these can be reinforced as appropriate.



Principles:

It is the right of the child to be treated with sensitivity and respect, and in such a way that their experience of personal care is a positive one. As far as possible the child should be allowed to exercise choice and should be encouraged to have a positive image of their body. There should be recognition that toileting support can involve risks for both the child and any adults in attendance.

Intimate Care Tasks - cover any task that involves:

- Dressing and undressing;
- Washing including intimate parts;
- Helping someone use the toilet;
- Changing nappies;
- Carrying out a procedure that requires direct or indirect contact to an intimate personal area.

Nursery, EYFS, KS1 and KS2:

By the time pupils enter the main school, most children are able independently to manage their own toileting needs. Children are encouraged to visit the toilet as needed and good hygiene rules are reinforced. If a child accidentally wets themselves, they will be provided with wipes and encouraged to clean themselves. Wet clothing will be bagged, and clean, dry clothing/PE kit will be available.

When accidental soiling occurs, the child will be taken to a suitable room where a member of staff will support cleaning and changing. Parents may be contacted if the child cannot be cleaned by wipes alone. If there are concerns around frequent wetting or soiling, staff will **meet with parents to discuss the child's individual needs. Some children will come to school with ongoing/specific physical or medical issues such as urinary tract infections or soiling difficulties. If the child requires a medical care plan, policies on child protection and managing children's needs will be consulted.**

Procedures:

In Nursery and Early Years we recognise that children will join us having reached differing levels of independence and development in toileting and self-care.

- Children are changed whenever the need arises. Children are not left in wet/soiled clothing;
- Children are encouraged to take an interest in using the toilet; they may just want to sit on the toilet at first;
- Older children can access the toilets whenever they have the need to and are encouraged to be as independent as possible;
- Children are reminded at regular times to go to the toilet;
- **New children have a general 'induction' tour of the toilet to make them feel safe and comfortable;**
- Children are encouraged to wash their hands after using the toilet and use hand towels;
- Gloves are put on before changing commences;
- **Creams and lotions, can only be applied with a parent's consent, as instructed on the child's registration form. Any prescribed cream etc. can only be applied if the appropriate medication form has been completed;**
- Most children will be engaged in fully developing this aspect of their self-care when they start school;
- Some children will not have had the practice that they need to use the facilities available: this could include culturally different expectations of self-care;



- Some children may start wetting or soiling themselves after they start school or Nursery during the settling-in period. **In these circumstances, the child's key person/teacher** communicates sensitively with parents to determine if this is a temporary set-back (anxiety, arrival of new sibling, illness etc).

Children with SEND:

Some children with SEND may require intimate care beyond early years and throughout school. Where this is required, staff will meet with parents to write a personalised intimate care plan. Where possible, a named **member of staff will be responsible for a child's intimate care.**

Partnership with Parents/Carers:

Staff work in partnership with parents/carers to provide care appropriate to the needs of the individual child and together, if necessary, will produce a care plan setting out:

- What care is required;
- **The child's level of ability i.e. what tasks they are able to do by themselves**;
- Acknowledgement and respect for any cultural or religious sensitivities related to aspects of intimate care;
- Regular monitoring **and review in accordance with the child's development.** Parents/Carers are asked to supply the following if required:
 - Wipes, creams etc.
 - Spare clothes.

Best Practice:

- All staff have an enhanced DBS check;
- 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;
- Particular staff members are identified to change a child with known needs and they plan and record their work with that child;
- Dealing with body fluids:
 - Urine, faeces, blood and vomit will be cleaned up immediately and disposed of safely using the disposal bins provided;
 - When dealing with body fluids, staff wear protective clothing (disposal plastic gloves) and wash themselves thoroughly afterward;
 - **Soiled children's clothing will 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.

Sensitivity and Respect:

- Each child will be spoken to by name and given explanations of what is happening;
- **Privacy appropriate to the child's age and situation will be provided;**
- The child will be encouraged to care for themselves as far as possible;
- Items of good quality, appropriately sized spare clothing will be readily available or provided by parents if the child has a medical condition which results in toileting accidents;
- **Adults should be aware and responsive to the child's reactions;**



- Some children refuse or are very reluctant for an adult outside of the family to care for them. In these circumstances special arrangements can be made for a family member to come in. The dignity of the child must be respected and so as much as can be kept confidential between child, school and parent is kept confidential.

Safeguarding Children and Adults:

Anyone caring for children has a duty of care to act like any prudent parent. Staff ensure that children are healthy and safe at all times:

- Adults dealing with the toileting needs of children are employees of the school and have undergone enhanced DBS disclosure;
- **All staff are aware of the school's protocol and procedures following an induction and are kept informed of updates via the school's Designated Safeguarding Lead;**
- All staff have received appropriate safeguarding training and will receive support where necessary;
- All toileting incidents must be reported straight away to the class teacher. The minimum information to be kept is the date and time, the initials of the child, the adult(s) in attendance, the nature of the incident;
- The parents are informed as soon as possible and staff should have the opportunity to raise any concerns or issues;
- Leaving a child in soiled or wet clothing for any length of time, even if waiting for the arrival of a parent or carer, could be interpreted as a form of abuse;
- The normal process of cleaning a child should not raise child protection concerns, and there are no regulations that indicate that a second member of staff must be available to supervise the process to ensure that abuse does not take place. DBS checks are carried out to ensure the safety of the children with staff employed by the school. If there is known risk of false allegation by a child or parent, then a single member of staff should not clean a child unsupervised.

Health and Safety:

In the case of a child accidentally wetting, soiling or being sick whilst on the premises.

- Staff should wear disposable gloves to deal with the incident;
- Provide flushable wipes and encourage the child to use them and to wash the private parts of their body;
- Ensure soiled clothing is double bagged and tied;
- Hot water and soap are available to wash hands as soon as the task is completed.

Roles and Responsibilities:

Parents and carers are made aware of policies and procedures related to intimate care and all specific instances related to their child. If it becomes evident that a child has an ongoing problem that requires regular intimate care intervention, the school will make arrangements with the parent/carer for the long-term resolution of the problem. This is likely to include a care plan that involves the parent/carer directly as well as external reference to a Health Care professional.

Advice and Support:

There are other professionals who can help with advice and support. Family Health Visitors and School Nurses have expertise in this area and can support adults to implement toilet training programmes in the home. Health Care Professionals can also carry out a full health assessment in order to rule out any medical cause of continence problem. Parents are **more likely to be open about their concerns for their child's learning and development and**



seek help if they are confident that they and their child are not going to be judged for their delayed development.

Through the following actions discussed in this policy we will endeavour to support all parties.

- Promote consistent and caring relationships through the key person system in the Nursery and Reception to ensure all parents/ carers understand how this works;
- All staff will be trained in the appropriate methods for intimate care routines and access specialist training where required, i.e. first aid training, specialist medical support;
- Conduct thorough inductions for all new staff to ensure they are fully aware of all procedures relating to intimate care routines;
- Follow up on these procedures through supervision meetings and appraisals to identify any areas for development or further training;
- Staff will **work closely with parents/ carers on all aspects of the child's care and education**;
- Ensure all staff receive regular safeguarding/ child protection training and know how to protect all children from harm. This includes identifying signs and symptoms of abuse and how to raise these concerns in the most appropriate and speedy manner;
- Ensure all staff are trained in behaviour management techniques which may include using restraint techniques where required. e.g. if a child is likely to hurt themselves or others.

Girls Sanitary Needs:

- **There are sanitary disposal facilities in the Year 5/6 girls' toilets, disabled toilets, staff toilets.** Girls are advised to use these facilities;
- There are emergency sanitary protection products and spare underwear available in the KS2 classroom cupboards, school office and the medical room;
- Girls are encouraged to speak to any member of staff they feel comfortable with;
- Body Changes work is taught in Year 5 so that young girls understand the changes they may be going through.