



STRATFORD RURAL SCHOOLS FEDERATION

LOXLEY C OF E COMMUNITY PRIMARY SCHOOL

SNITTERFIELD PRIMARY SCHOOL

WILMCOTE C OF E PRIMARY SCHOOL

*Small schools, big ambitions...*

# FEDERATION

# INTIMATE PERSONAL

# CARE POLICY

Original version	April 2016
Adopted by the Governing Body	11/05/2016
Reviewed	April 2018
Reviewed	October 2019
Adopted by the Governing Body	18/10/2019
Reviewed	September 2021
Adopted by the Governing Body	24/09/2021
Reviewed	October 2023
Adopted by the Governing Body	25/10/2023

Ref:

WCC Guidance on Special Toileting Needs in Schools and Early Years' Settings. Latest version:



WCC Special  
Toileting Needs in sch

## Introduction

Intimate care is any care which involves washing, touching or carrying out an invasive procedure to intimate personal areas. This might include cleaning up a pupil after they have soiled themselves or even helping with a catheter or feeding tube. In most cases such care will involve cleaning for hygiene purposes as part of a staff member's duty of care. In the case of a specific procedure only a person suitably trained and assessed as competent should undertake the procedure, (e.g. the administration of rectal diazepam).

The issue of intimate care is a sensitive one and will require staff to be respectful of the child's needs. The child's dignity should always be preserved with a high level of privacy, choice and control wherever possible. There shall be a high awareness of child protection issues. Staff behaviour may be open to scrutiny and staff must work in partnership with parents/carers to provide continuity of care to children wherever possible.

The schools within the Stratford Rural Schools Federation are committed to ensuring that all staff responsible for the intimate care of children will undertake their duties in a professional manner at all times. We recognise that there is a need to treat all children with respect when intimate care is given. No child should be attended to in a way that causes distress or pain.

This policy is intended to incorporate care for young children with occasional toileting needs as well as those with a specific diagnosed medical condition.

## Our Approach to Best Practice

The management of all children with intimate care needs will be carefully planned. The child who requires intimate care is treated with respect at all times; the child's welfare and dignity are of paramount importance.

Staff who provide intimate care for children with diagnosed conditions are trained to do so (including Child Protection and Health and Safety training as needed for specific pupils with EHCPs/disabilities) and are made fully aware of best practice. Apparatus will be provided to assist with children who need special arrangements following assessment from a physiotherapist or an occupational therapist as required.

The child will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each child to do as much for themselves as they are able. This may mean, for example, giving the child responsibility for washing themselves. Individual Intimate Care Plans will be drawn up for particular children as appropriate to suit the circumstances of the child (**APPENDIX 1**).

Each child's right to privacy will be respected. Careful consideration will be given to each child's situation to determine how many carers might need to be present when a child is toileted.

Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the child's care plan (**APPENDIX 1**). The needs and wishes of children and parents will be taken into account wherever possible within the constraints of staffing and equal opportunities legislation.

## The Protection of Children

Federation Child Protection procedures will be adhered to. All children are taught personal safety skills matched to their level of development and understanding. If a member of staff has any concerns about physical changes in a child's presentation, e.g. marks, bruises, soreness etc they will immediately report concerns to the Designated Safeguarding Lead (DSL) and record on the school's system (Green Form or CPOMS).

If a child makes an allegation against a member of staff, all necessary procedures will be followed (see the Safeguarding and Child Protection Policy/Managing Allegations against Staff Policy for details). To safeguard against this it is recommended that 2 adults attend to a child where possible.

## Changing Facilities

Children who have long-term incontinence or other medical needs may require specially adapted facilities. The dignity and privacy of the child should be of paramount concern. Consideration should be given to the siting of this area from a health and safety aspect. The area should not be situated in a thoroughfare, as a changing mat may have to be used on the floor when a child is being changed. This method of changing a child is recommended, as it avoids having to lift a child and cause possible back injury. When choosing a school for their child, consideration should be given by parents to the facilities available in the school.

## Toileting – occasional incidents

If a child has soiled themselves, it is essential that federation staff protect the child and themselves by:

*(All age dependent – a child may manage this themselves if deemed capable)*

1. Where practical, phoning the parent/carer to inform them that their child has had an accident. This can be done before or after the child is cleaned up.
2. Preferably, two adults are involved in the process (one to clean and the other to stand by the door to manage privacy);
3. Depending on the age of the child – the child should have autonomy at all times;
4. The situation should preferably be dealt with in a toilet/hygiene room.

## Toileting – regular requirement

In the case of supporting a child who requires regular toileting, the federation has a Toilet Management Plan which is completed prior to the child taking up their place (**APPENDIX 1**). If the toilet management plan has been agreed and signed by parents and staff, it is acceptable for two members of staff to assist a child unless there is an implication for safe moving and handling of the child.

## Equipment Provision

Parents have a role to play when their child is still wearing nappies/pull ups or if a child requires other equipment or resources to assist with intimate care. The parent should provide nappies/pull ups, disposal bags, wipes, changing mat etc. and the parent should be made aware of this responsibility. The school is responsible for providing gloves, plastic aprons, a bin and liners to dispose of any waste. Liaison with healthcare professionals will be necessary for children who require intimate care due to a medical need.

## Health and Safety

Staff should wear a plastic apron and gloves when dealing with a child who is wet or soiled, when changing a soiled nappy or dealing with any other intimate care procedure. Any soiled waste should be placed in a polythene waste disposal bag, which can be sealed. This bag should then be placed in a bin (complete with liner and lid) which is specifically designated for the disposal of such waste i.e. not the general toilets/bathroom bin.

## Special Needs

Children with special needs have the same rights to safety and privacy when receiving intimate care. Additional vulnerabilities that may arise from a physical disability or learning difficulty must be considered with regard to individual teaching and PLPs (Personalised Learning Plans) for each child. As with all arrangements for intimate care needs, agreements between the child, those with parental responsibility and the school should be easily understood and recorded (**APPENDIX 1**).

Parents of pupils with regular soiling/wetting will be encouraged to leave a change of clothes in school for the use of their child.

This policy is to be read in conjunction with our Safeguarding Policies:

- *Safeguarding & Child Protection;*
- *Behaviour;*
- *Health and Safety;*
- *Equality Duty Objectives;*
- *Staff Code of Conduct;*
- *Managing allegations against staff;*
- *Whistleblowing.*

## TOILET MANAGEMENT PLAN

### Parental Permission for Staff to Provide Intimate Care for children with SEND

**I understand that:**

- I give permission to the school to provide appropriate intimate care support to my child e.g. changing soiled clothing, washing and toileting;
- I will advise the Head of School of any medical reason my child may have which affects issues of intimate care;
- I understand that the intimate care provided for my child will be given by two members of staff (at all times) unless he/she needs lifting/carrying and there will be another member of staff.
- I understand that the member(s) of staff providing the care for my child have had appropriate training, including in Child Protection.

<b>Parent/Carer name</b>	
<b>Address</b>	
<b>Signature</b>	
<b>Relationship to child</b>	
<b>Child's name</b>	
<b>Date of Birth</b>	

INTIMATE CARE PLAN	
Child's Name	
Date of Birth	
Year Group	
Area of Need	
Equipment provided by parents	
Location of suitable facilities	
Frequency of support	
<b>Other relevant information</b>  <ul style="list-style-type: none"> <li>• What will happen in a fire drill if care is being provided?</li> <li>• What will happen if care is needed on an off-site visit?</li> <li>• Decide on communication method with parents.</li> </ul>	

- Staff involved in intimate care are expected to record all instances of care being provided.
- This can be in a notebook or on a record sheet, and should be available for parents on request.
- Staff should be aware of noting patterns of soiling or wetness, and should inform parents if they consider anything unusual.