

## **Oasis Academy Bank Leaze Intimate and Toileting Policy**

### **1. Introduction**

Oasis Academy Bank Leaze is committed to safeguarding and promoting the welfare of children and young people. We are committed to ensuring that all staff responsible for intimate care of children will undertake their duties in a professional manner to all times. The Intimate Care Policy and Guidelines regarding children have been developed to safeguard children and staff. They apply to everyone involved in the intimate care of children.

Intimate care is any care which involves washing, touching or carrying out an invasive procedure (such as cleaning up after a child has soiled him/herself), that most children can carry out for themselves, but with 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.

### **2. Aims and Objectives**

This policy aims:

- To provide guidance and reassurance to staff and parents.
- To safeguard the dignity, rights and well-being of children.
- To assure parents that staff are knowledgeable about intimate care and that their individual needs and concerns are taken into account.

### **3. Toileting and the Foundation Stage Profile**

Curriculum guidance for the Foundation Stage is clear that the role of the adult involves supporting the child's whole development, particularly their Personal, Social and Emotional development including supporting the transition between settings. One of the Early Learning Goals for children to achieve by the end of the Foundation Stage is to "manage their own basic hygiene and personal needs successfully, including dressing and undressing and going to the toilet independently".

### **4. Intimate Care in Key Stage 1 and Key Stage 2**

**Key Stage 1** – We will inform all parents of Reception children prior to them starting school of the current toileting policy highlighting that we will change children for odd 'accidents' but not routinely as part of day to day personal care. This is different if a child has a disability or health reason for needing support in this area.

**Key Stage 2** – Any child that soils or wets will not be changed by any member of staff. However, we will provide a private, safe space (First Aid room) where the child may change

on their own. We will supply warm water and cotton wool, clean clothes (to the best of our ability out of the 'spares box' and a carrier bag. Parents will be contact to assist if required.

### **5. Parental responsibility**

Partnership with parents is an important 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. Prior permission must be obtained from parents before intimate care procedures are carried out (see Appendix 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 Pupil Pathways, Health Care Plans, Pupil Profiles and any other plans which identify the support of intimate care where appropriate. Exchanging information with parents is essential through personal contact, telephone or correspondence.

What the academy expects of parents:

- Parents/carers will endeavour to ensure their child is continent before admission to school (unless the child has additional needs).
- Parents/carers will discuss any specific concerns with staff about their child's toileting needs.
- Parents/carers must inform the academy if a child is not fully trained before starting school, after which a meeting will then be arranged to discuss the child's individual needs.
- Parents/carers accept that on occasions they may need to be called to the school to assist in making their child comfortable and ready to learn. Their child may need to be collected from school.

### **6. Staff responsibilities**

Anyone caring for children, including teachers and other school staff, has a duty to care and act like any reasonably prudent parents. Intimate care routines should always take place in an area which protects the child's privacy and dignity. Children's intimate care routines should always be carried out by an assigned member of staff. Appropriate support and training should be provided when necessary.

The following steps will be taken to ensure health and safety of both staff and children:

1. Alert another member of staff. The toilet door must be left open if two adults are not available.
2. Escort the child to a changing area i.e. designated toilet areas.
3. Collect equipment and clothes.
4. Adult to wear gloves and apron.

5. Child to undress as appropriate and clean themselves as much as possible under the verbal guidance of an adult.
6. Soiled clothes to be placed inside carrier bags (double wrapped), and to be given to parents at the end of the day. Plastic aprons and gloves should be disposed of in the designated bin.
7. Children are expected to dress themselves in clean clothing, wash their hands and return to class.
8. Adult should wash their hands thoroughly after the procedure.
9. Area to be cleaned and disinfected by adult before returning to class.

Intimate care incidents must be recorded (on the clipboard sheets in the child's class) including date, time, name of child, adult(s) in attendance, nature of the incident, action taken and concerns or issues. This will also monitor progress made. Parents/carers are to be informed as soon as possible or verbally at the end of the session.

In the interests of health and safety, it is unreasonable for staff to be expected to change a child who regularly soils unless the child has a medical condition as an underlying cause. School does not have the staffing levels to accommodate support teachers regularly leaving the class to attend to an individual's hygiene.

### **7. Special education needs and children protection issues**

The academy recognises that some children with SEN and other children's home circumstances may result in children arriving at school with under developed toilet training skills. If a child is not toilet trained because of a disability his/her rights to inclusion are additionally supported by the SEN & Disability Act 2001 and Part 1V of the Disability Discrimination Act 1995.

If a child's toileting needs are substantially different than those expected of a child their age, then the child's needs may be managed through a Pupil Pathway, or alternatively they may be considered to be at SEN Support in the SEN Code of Practice. A toileting programme would be agreed with parents as advised by a health professional. Intimate care arrangements will be discussed with parents on a regular basis, and recorded on the toileting plan. If there is no progress over a long period of time e.g. half a term, the SEN co-ordinator, teaching staff and parents would seek further support, e.g. a GP's referral of child for specialist assessment.

Some children may have an Education Health Care Plan (EHCP) before entering school. EHCP's outline the child's needs and objectives, and the educational provision to meet these needs and objectives. The EHCP will identify delayed self-help skills, and recommend a programme to develop these skills. The management of all children with intimate care needs will be carefully planned. Where specialist equipment and facilities above that currently available in the school are required, every effort will be made to provide

appropriate facilities in a timely fashion, following assessment by a physiotherapist and/or occupational therapist.

### **8. Child Protection**

Careful consideration will be given to individual situations to determine how many adults should be present during intimate care procedures. If the toilet management plan (see Appendix 2) has been agreed and signed by parents/carers, child and staff involved, it is acceptable for only one member of staff to assist unless there is an implication for safe moving and handling of the child. The needs and wishes of children and parents will be taken into account wherever possible, within the constraints of staffing and equal opportunities legislation.

If a member of staff has any concerns about physical changes in a child's presentation (unexplained marks, bruises or soreness for example), the recognised child protection procedures should be followed. If a member of staff notices any changes to a child either physically or emotionally following an episode of intimate care, the matter will be investigated at an appropriate level and outcomes recorded. Parents/carers will be contacted at the earliest opportunity. Local child protection procedures will be adhered to at all times.

**Appendix 1 – Record of Intimate Care Invention**

Child's Name: ..... DOB: .....

Name of Support Staff involved: .....

Date: .....

Time: .....

Procedure: .....

Staff Signature: .....

## **Appendix 2 – Toilet Management Plan**

Child's Name: ..... DOB: .....

Name of Support Staff Involved: .....

Area of need: .....

Equipment required: .....

Location of suitable toilet facilities: .....

Support required: .....

Frequency of support: .....

### **Working towards independence**

Child will try to .....

Personal Assistant will do .....

Target achieved.....

Review Date: .....

Parents/Carer: .....

Child (if appropriate): .....

Personal Assistant: .....

Senior Management/SENCO: .....

Date: .....

### **Appendix 3 – Permission to provide intimate care**

I understand that

- I give permission to the academy to provide appropriate intimate care support to my child e.g. changing soiled clothing, washing and toileting.
- I will advise the academy of any medical complaint my child may have which affects issues of intimate care.
- I will check my child is dry before sending them to school.

Name: .....

Signature: .....

Relationship to child: .....

Date: .....

Child's Surname: .....

Child's Forename: .....

Male/Female: .....

Date of birth: .....

Parents/Carers Name: .....

Address:  
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