



Intimate Care and Toileting Policy

***Let it be known to all who enter here that Christ is
the reason for this school,
the unseen but ever present teacher in its classes, the
model for its children, the inspiration for its staff.”***

Aims

The aims of this policy are:

- To safeguard the rights and promote the welfare of children
- To provide guidance and support to staff who are required to assist a child who has soiled themselves
- To assure parents/cares that staff are knowledgeable about personal care and that their children's individual needs are taken into account.
- To protect children from discrimination and ensure inclusion for all.

Sacred Heart Primary School 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 and young people will undertake their duties in a professional manner at all times.

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. Examples include support with dressing and undressing (underwear), changing incontinence pads and nappies, helping someone use the toilet or assisting a child to clean themselves. Disabled pupils may be unable to meet their own care needs for a variety of reasons and will require regular support.

The Governing Body recognises its 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. Staff will work in close partnership with parents and carers to share information and provide continuity of care. It is generally expected that most children will be toilet trained and out of nappies before they begin at school or nursery. It is inevitable that from time to time some children will have accidents and need to be attended to however, where a child is regularly soiling, parents maybe required to attend to the child themselves.

In addition to this an increasing number of children and young people with disabilities and medical conditions are included in mainstream settings. A significant number of these pupils require adult assistance for their personal and intimate care needs. In order to help the children to become aware of their bodily needs and respond to them in time, those who wish to go to the toilet are allowed to go, although they are encouraged as they progress through the school to use the toilet during break times. The school undertakes to attempt to support any training programme requested by a child's GP and/or the school doctor or parent.



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

- To remove their soiled clothes
- Direct or assist (where necessary) the child to clean their skin (this usually includes bottom, genitalia, legs, feet). If the child is unable to be cleaned to an acceptable standard then their parents/carers may be called to clean the child appropriately.
- In the case of diarrhoea, the child will be cleaned as necessary and the parents/carers rung to collect their child.
- Dress in the child's own clothes or those provided by the school
- Double wrap soiled clothes in plastic bags and give to parents to take home.

Another member of staff will remain in the vicinity to assist, where required, and to ensure privacy for the child.

At all times the member of staff pays attention to the level of distress and comfort of the child. If the child is ill the member of staff telephones the parent/carer. In the event a child is reluctant and finally refuses, the parent/carer will be contacted immediately.

Our intention is that the child will never be left in soiled clothing, but as soon as the member of staff responsible for him/her is aware of the situation, she/he will assist the child to clean themselves. The member of staff responsible will check the child regularly and to ensure that he/she is clean before leaving to go home. It is intended that the child will not experience any negative disciplining, but only positive encouragement and praise for his/her endeavours to master this necessary skill. It is always our intention to avoid drawing attention to such events and positively to encourage the child in his/her efforts to gain these skills. All incidents that require intimate care will be recorded and communicated to parents.

Items needed

- Pedal operated clinical waste bin
- Nappy sacks/bags
- Toilet seat if needed (provided by the parent)
- Bag for each child's nappies etc.
- Spare clothes
- Disposable gloves
- Disposable aprons
- Anti-bacterial spray
- Paper towels
- Liquid soap
- Steps



The following information has been taken from the Health Protection Agency Guidance on Infection Controls in Schools and Early Years Settings (April 2010)

Personal Protection Equipment (PPE)

Disposable non-powdered vinyl or latex-free CE- marked gloves, disposable plastic aprons and masks must be worn where there is a risk of splashing or contamination with blood/bodily fluids (for example, nappy or pad changing)

Wear PPE when handling soiled clothes. Children's soiled clothing should be bagged to go home, never rinsed by hand.

Clinical Waste

Domestic and clinical waste will be kept segregated. Used nappies, gloves, aprons, wipes and soiled dressings should be stored in correct clinical waste bags in foot operated bins. All clinical waste will be removed weekly by a registered waste contractor. All clinical waste bags should be less than two-thirds full and stored in a dedicated, secure area whilst awaiting collection.

Our approach to best practice for ultimate care needs over and above accidents.

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.

There is careful communication 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

Individual care plans will be drawn up for any pupil requiring regular intimate care

Careful consideration will be given to individual situations to determine how many adults should be present during intimate care procedures. In such cases, the reasons will be documented.

Intimate care arrangements will be discussed with parents on a regular basis and recorded 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 will be informed the same day.

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