

Reviewed by	Watton LGB November 2024
Chair of Governors	Diane Bainbridge
Next Review date	November 2025

The schools are committed to safeguarding and promoting the welfare of children and young people. We ensure that all staff responsible for intimate care of children and young people undertake their duties in a professional manner at all times.

Intimate care is defined as any care which involves washing, touching or carrying out an invasive procedure that most children and young 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. Examples include support with dressing and undressing (underwear), changing incontinence pads and nappies, helping someone use the toilet or washing intimate parts of the body. 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 dignity and 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. However, it is inevitable that from time to time some children will have accidents and need to be attended to. In addition to this an increasing number of children and young people with disabilities and medical conditions are being 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 always 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 any support any training programme requested by a child's GP and/or the school doctor or parent.

We encourage all our children to be independent, however, occasionally a child will need support in wiping themselves.

Permission is sought as children enter the nurseries or Early Years Foundation Stage (EYFS) and slips are kept on record. All staff are informed of those children where no permission is given.

Where a child has continuing incontinence problems (i.e. past EYFS) parents are expected to continue to provide a complete set of spare clothes and 'baby-wipes'. The school also keeps a stock of spare clothes in various sizes. Teachers will advise the parents to attend a GP appointment to discuss the continuing incontinence.

Nursery and EYFS staff have access to a private bathroom/changing area with a toilet and hand basin with access to warm water. There is also a stock of wipes, plastic bags and disposable protective gloves for staff to use, which they must do. If a child soils him/herself during school time, one member of the staff (teacher, TA, NNEB, practitioner, meals supervisor) will help the child, whilst telling another member of staff or whilst another member of staff waits near the ajar door:

- To remove their soiled clothes
- Clean skin (this usually includes bottom, genitalia, legs, feet)
- 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.

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 clean the child. The member of staff

responsible will check the child regularly and to ensure that he/she is clean before leaving to go home. The latter is because the school washing facilities are not accessible to parents.

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.

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

The management of all children with intimate care needs will be carefully planned.

Where specialist equipment and facilities are currently not available in the school, 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.

Pupils will be supported to achieve the highest level of independence possible, according to their individual condition and abilities.

Careful consideration will be given to individual situations to determine how many adults should be present during intimate care procedures. Where possible one pupil will be cared for by one adult unless there is a sound reason for having more adults present. In such a case, the reasons will be documented.

Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded in the intimate care logbook.

The needs and wishes of children and parents will be considered 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 information should be treated as confidential and communicated in person, via telephone or by email.

## **Child Protection**

The Governors and staff recognise that disabled children are particularly vulnerable to all forms of abuse.

Child Protection and Multi-Agency Child Protection procedures will be adhered to at all times.

If a member of staff has any concerns about physical changes in a child's presentation (unexplained marks, bruises or soreness for example) s/he will immediately report concerns to the Designated Person for Child Protection.

If a child becomes distressed or unhappy about being cared for a particular member of staff, the matter will be investigated at an appropriate level and outcomes recorded.

Parents/carers will be contacted at the earliest opportunity as part of the process of reaching a resolution. Further advice will be taken from partner agencies.

If a child makes an allegation about a member of staff this will be investigated in accordance with agreed procedures.