



ENSURING SAFE PRACTICE: PERSONAL AND INTIMATE CARE POLICY

September 2022

Written by: Gerard Strong & Amy Vinton

Review date: September 2023

1. Introduction

Joydens Wood Infant 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 will undertake their duties in a professional manner at all times. The Personal and Intimate Care Policy has been developed to ensure procedures and safe practice is adhered to; it is to safeguard children and staff. They apply to everyone involved in the intimate care of children.

Intimate care is any care which involves supporting a child who has soiled him/herself in the event that they are unable to do this independently. Some children will require frequent support in this area and therefore the intimate care and Personal and Intimate Care Policy should be discussed with parents/carers at length and a Personal and Intimate Care Plan should be agreed and signed (see Appendix 1).

2. Aims and Objectives

This policy aims:

- To provide guidance and reassurance to staff and parent/s
- 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. Personal and Intimate Care and the Foundation Stage

Curriculum guidance for the Foundation Stage is clear that the role of the adult involves supporting the child's whole development, including their Personal, Social and Emotional development, 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"*.

From September 2017, as part of the entry paperwork into the school, parents/carers will be asked to sign the agreement as part of our safe-guarding policy. From January 2017 only parents/carers of children who currently require toileting support/intimate care will be asked to read/sign the document.

4. Intimate Care in Key Stage 1

We will inform all parents prior to their children starting school of the current Personal and Intimate Care Policy highlighting that we will support (if needed), changing children for odd 'accidents' but not routinely as part of day to day personal care. Parents/carers will be called for children who persistently wet and/or soil themselves unless the school is in receipt of medical evidence that a child has a medical condition or SEND that means they are unable to control their toileting and/or unable to clean themselves independently. If a child has a medical condition or SEND they will have a Personal and Intimate Care Plan and/or Health Care Plan that outlines the additional support required, which will have been specifically advised by a healthcare professional. This will be applicable for the time a child is in infants (unless a parent informs us differently in writing).

5. Parental responsibility

Partnership with parents is an important principle in any educational setting and is particularly necessary in relation to children needing Personal and Intimate Care procedures. Prior permission must be obtained from parents before Personal and Intimate Care procedures are carried out (see Appendix 1). 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 Educational Health Care plans (EHCPs), and any other plans which identify the support of Personal and Intimate Care procedures where appropriate. Exchanging information with parents is essential through personal contact, telephone or written correspondence.

What the school expects of parents:

- Parents/carers will endeavor to ensure that 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 school if a child is not fully toilet trained before starting school, after which a meeting will then be arranged to discuss the child's needs.
- Parents accept that on occasions their child may need to be collected from school if staff feel that it is not appropriate to change/support them when toileting (see section 7 of this policy for more information).

6. Staff responsibilities

All our staff are trained annually in Safeguarding and Safe Practice in the workplace. Staff are aware that it is their responsibility to ensure they keep children safe, exercise safe practice and report any concerns following specific procedures/guidelines outlined in the school's Safeguarding Policy.

7. The following steps will be taken to ensure health and safety of both staff and children in the event that a specific child requires Personal and Intimate Care:

1. Where intimate care is required, always change a child with another member of staff supervising/helping where possible. It is not safe-practice to change a child without another adult present.
2. Collect equipment and clothes prior to administering the care.
3. Escort the child to a suitable changing area in which they are comfortable.
4. Adults to thoroughly wash their hands.
5. Adult to wear disposable gloves and apron.
6. Child to undress as appropriate and clean themselves as much as possible under the verbal guidance of an adult.

****In the event a child has soiled him/herself and is unable to independently clean their genitals under the verbal guidance of the adult, the parent/carer must be telephoned and asked to assist or take their child home to be cleaned. Under no circumstances are members of staff required to do this, even if permission is given by the parent.***

7. Soiled clothes to be placed inside carrier bags and to be given to parents at the end of the day (we do not throw away/clean soiled clothing). Plastic aprons and gloves should be disposed of in the designated bin.
8. Children are expected to dress themselves in clean clothing, wash their hands and return to class.
9. Adult(s) should wash their hands thoroughly after the procedure.
10. Area to be cleaned and disinfected by adult, as required, before returning to class.
11. Personal and Intimate procedures must be recorded on CPOMS ensuring that the date and time are correct and including: 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 either verbally or using a Record of Personal and Intimate Care Intervention Slip (see Appendix 2)

In the interests of Health & Safety, it is unreasonable for staff to be expected to change a child who regularly soils unless the child has a special educational need/medical condition as an underlying cause and the school has been provided with medical evidence and support from professionals involved with the child. School does not have staffing levels to accommodate support teachers regularly leaving the class to attend to an individual's hygiene.

Special educational needs and child protection issues

The school recognises that some children with SEN and other children's home circumstances may result in children arriving at school with underdeveloped toilet training skills. If a child's personal and intimate care needs are substantially different than those expected of a child their age, then the school would expect to seek advice and support from relevant medical professionals. In some circumstances it may be appropriate for a personal and intimate care program to be agreed with parents as advised by a Health Professional. Personal and Intimate Care Procedures will be discussed with parents/carers on a regular basis and recorded on the personal and intimate care plan. If there is no progress over a long period of time, e.g. half a term, the SEN Coordinator, teaching staff and parents would seek further support, e.g. G.P's referral of child for specialist assessment.

Some children may have an Education Health and Care Plan. This will outline the child's needs and objectives and the educational provision to meet these needs and objectives. The statement will identify delayed self-help skills and recommend a program to develop these skills. The management of all children with personal and 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.

9. Child Protection

Careful consideration will be given to individual situations to determine how many adults should be present during Personal and Intimate Care procedures. The needs and wishes of children and parents will be taken into account wherever possible, within the constraints of staffing.

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 must be followed. If a member of staff notices any changes to a child either physically or emotionally following an episode of Personal and Intimate Care, the matter will be investigated at an appropriate level and outcomes recorded.

APPENDIX 1

Personal and Intimate Care Plan

**As per the school's
Personal and Intimate Care Policy
the following steps will be taken to ensure health and safety of both staff and children in
the event that a specific child requires Personal and Intimate Care:**

1. Where intimate care is required, always change a child with another member of staff supervising/helping where possible. It is not safe-practice to change a child without another adult present.
2. Collect equipment and clothes prior to administering the care.
3. Escort the child to a suitable changing area in which they are comfortable.
4. Adults to thoroughly wash their hands.
5. Adult to wear disposable gloves and apron.
6. Child to undress as appropriate and clean themselves as much as possible under the verbal guidance of an adult.

****In the event a child has soiled him/herself and is unable to independently clean their genitals under the verbal guidance of the adult, the parent/carer must be telephoned and asked to assist or take their child home to be cleaned. Under no circumstances are members of staff required to do this, even if permission is given by the parent.***

7. Soiled clothes to be placed inside carrier bags and to be given to parents at the end of the day (we do not throw away/clean soiled clothing). Plastic aprons and gloves should be disposed of in the designated bin.
8. Children are expected to dress themselves in clean clothing, wash their hands and return to class.
9. Adult(s) should wash their hands thoroughly after the procedure.
10. Area to be cleaned and disinfected by adult, as required, before returning to class.
11. Personal and Intimate procedures must be recorded on CPOMS ensuring that the date and time are correct and including: 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 either verbally or using a Record of Personal and Intimate Care Intervention Slip (see Appendix 2)

In the interests of Health & Safety, it is unreasonable for staff to be expected to change a child who regularly soils unless the child has a special educational need/medical condition as an underlying cause and the school has been provided with medical evidence and support from professionals involved with the child. School does not have staffing levels to accommodate support teachers regularly leaving the class to attend to an individual's hygiene.

Special educational needs and child protection issues

The school recognises that some children with SEN and other children's home circumstances may result in children arriving at school with underdeveloped toilet training skills. If a child's toileting needs are substantially different than those expected of a child his age, then the child's needs may be managed through an Educational Health Care Plan or alternatively they may be considered to be SEN Support. In some circumstances it may be appropriate for a toileting program to be agreed with parents as advised by a Health Professional. Personal and Intimate Care Procedures will be discussed with parents/carers 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. G.P's referral of child for specialist assessment.

Some children may have a statement of special educational needs before entering school. The statement will outline the child's needs and objectives and the educational provision to meet these needs and objectives. The statement will identify delayed self-help skills and recommend a program to develop these skills. The management of all children with Personal and 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.

Personal and Intimate Care Plan

Child's Name:

DOB:

Staff: Any employed member of staff.

Where appropriate we will endeavor to have a familiar adult to child to administer any toileting support.

Area of need:

Equipment required:

Location of suitable toilet facilities:

Support required:

Frequency of support:

Working towards Independence

Child will try to:

.....

At School: Teacher/Teaching Assistant will do:

.....

.....

At home: Parent/Carer will do:

.....

.....

Review Date:

Parents/Carer Name:

Parents/Carer Signature:

Teacher Name:

Teacher signature:

SENCO Signature:

Date:

APPENDIX 2

(printed on blue slips, available in every classroom)

RECORD OF PERSONAL AND INTIMATE CARE INTERVENTION

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

Name of Support Staff Involved.....

Date.....

Time.....

Procedure.....

Staff Signature.....