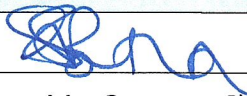




**Orchard
Primary**

Intimate Care and Continence Policy

Signed by:	
Head Teacher	
Chair of Governors	Mrs Suzanne Clarke
Date Adopted	05 February 2013
Date Reviewed	Spring Term 2024
Date of Next Review	Spring Term 2026

Introduction

At Orchard Primary School we believe that all our pupils should feel emotionally and physically secure in order to achieve well and enjoy their learning. Some children who attend our school may require help and support with some aspects of their intimate and personal care. We recognise our responsibility in meeting the needs of all our pupils and will make reasonable adjustments to ensure we do this.

The issue of intimate care is a sensitive one and the child's dignity should always be preserved with a high level of respect and privacy. No child should be attended to in a way that causes distress, embarrassment or pain. We are committed to ensuring that all staff responsible for the intimate care of children undertake their duties in a professional manner at all times.

Definition of Intimate Care

For the purpose of this policy, intimate care is defined as any care which may involve the following:

- Washing
- Carrying out an invasive procedure
- Changing a child who has soiled themselves
- Assisting in toilet issues
- Providing comfort to an upset or distressed pupil

Intimate care tasks are associated with bodily functions, body products and personal hygiene that demand direct or indirect contact with, or exposure of, intimate personal areas. Examples of intimate care include support with dressing and undressing (underwear), changing incontinence pads/nappies, helping someone use the toilet or washing intimate parts of the body, cleaning a pupil who has soiled him/herself or vomited. It is also associated with other accidents that may require a child to remove their clothes, for example as a result of water play or messy play.

Pupils may be unable to meet their own care needs for a variety of reasons and will require regular support.

This policy does not cover intimate care of children with more complex health conditions eg catheters, colostomy bags. Advice regarding these health conditions will be sought from NHS professionals and parents/carers before an individual care plan is drawn up.

Aim of this Policy

- To ensure that children requiring intimate care are treated with sensitivity and respect.
- To provide clear guidelines for all staff on procedures that maintain a professional approach appropriate to the age, developmental stage and needs of the child.
- To support staff to meet the holistic needs of children including the development of continence and independence.
- To establish good practice in the care of children with management of continence needs.
- To ensure good safeguarding practices to protect children, staff, and volunteers.

- To establish partnership working between the child, the child's parents/carers and professionals involved.

Safeguarding

Intimate care is a regulated activity; therefore, only members of staff who have an enhanced DBS certificate with a barred list check are permitted to undertake intimate care duties.

The normal process of assisting with personal care, such as changing nappies, should not raise child protection concerns and there is no requirement to have two members of staff present. The exceptions to this are when a specific medical condition exists that requires a complex procedure and/or where there is a known risk of false allegation by a child.

To minimise risk, we will ensure that:

- The school's Safeguarding Policy is adhered to at all times.
- All adults working with children have enhanced DBS clearance and are closely supervised throughout any probationary period. Staff should only be allowed unsupervised access to children once the probationary period has been completed to the Head Teacher's satisfaction.
- Where staff have concerns about a child's wellbeing or safety arising from something said by the child or observation made by staff, the Designated Safeguarding Lead will be informed.
- All staff members are vigilant for any indication of inappropriate practice and report such concerns to the designated safeguarding lead (DSL).
- If there is a known risk of false allegations by a child or the child exhibits extreme behaviour on a regular basis, then appropriate precautions will be incorporated into the child's plan – eg two adults to be present when changing the child.
- We have sufficient suitably trained staff to be able to deal with continence issues.
- Volunteers and students will not be involved with intimate care procedures.
- Staff carrying out intimate care procedures should inform another member of staff when taking a child out of a classroom for this purpose.
- Children should not be left alone or unattended during changing procedures. Care should be taken when using a changing table.
- All staff involved in changing nappies or supporting toileting are aware of the child's health care plan and ensure that this is adhered to at all times. Any deviation from the plan should be reported and recorded in line with setting procedures.
- If a child becomes distressed whilst care is being given, the procedure should be stopped and advice sought from a senior member of staff. Attempts will be made to calm and reassure the child and continue to the care.
- If a child becomes distressed while being cared for by a particular member of staff, this will be investigated by the Head Teacher and an alternative staff member provided.
- Parents and line managers are informed of any accidents or concerns that arise whilst changing children and these are recorded in accordance with setting procedures.

Confidentiality

Sensitive information about a child will only be shared with those who need to know, such as parents or members of staff who are specifically involved with the child. Other adults will only be told what is necessary for them to keep the child safe.

If a child has needed help with meeting intimate care needs (or has had an accident) during the school day, this will be treated as confidential and will be shared with the parent/carer at the end of the day.

Working with Parents

We work closely with parents to identify and ensure we meet the child's needs. Cultural and religious values are respected when planning for their care. We aim to engage in regular communication with parents and will monitor and review any Intimate Care Plan with them.

Responsibility

The Pre School Manager or Class Teacher are responsible for ensuring that all children's changing needs are met every session. The school's SENDCo is responsible for liaising with parents/carers to complete a Health Care Plan for each child who requires intimate care in school.

Nappy Changing and Toileting in Early Years

All children are able to attend our pre-school setting whether they are toilet trained, toilet training or wearing nappies or equivalent. It is usual for children starting in our Reception class to be toilet trained.

We will work with parents and carers towards toilet training, unless there are medical or other developmental reasons why this may not be appropriate.

We see toilet training as a self-care skill that children have the opportunity to learn with the full support and non-judgmental concern of adults. All staff are familiar with the hygiene procedures and carry these out when changing nappies.

To enable us to care for the children's physical needs we ask that parents/carers:

- Inform staff about their child's changing requirements prior to the child starting at Pre-school/School; this information should be regularly reviewed and updated to ensure that the needs of the child are met.
- Make sure that wherever possible children arrive at Pre-school/School wearing a clean nappy or trainer pants/pull-up.
- Provide nappies, pull-ups, baby wipes, nappy sacks and bags for soiled clothes so that if it is necessary to change the child their individual needs can be met.
- Provide a spare change of clothes in a named bag.
- Discuss any issues arising from the policy with the child's Key Person.

Beyond the Early Years

Some children may still require intimate care in Key Stage 1 and Key Stage 2. Consideration will be given to the individual needs of these children. Where possible, care will be planned and negotiated with the child to ensure that their wishes are heard as part of a Health Care Plan.

Intimate Care away from School Premises

Visits and activities outside of the school building are a normal and exciting part of our curriculum and children who require some form of intimate care should have the same access to these opportunities as other children.

- All activities must be carefully planned to ensure that the same high standards of care are provided outside school as they are in school.
- Consideration should be given to intimate care needs as part of the risk assessment process for educational visits and activities out of school and in line with the child's Health Care Plan.
- Staff should ensure that any location has the necessary facilities before planning any visit.

Equipment and Facilities

Appropriate equipment necessary for the intimate care procedure will be identified and resourced by the Local Authority/school/parent/carer/health agencies.

It is expected that sufficient personal articles, eg nappies/pads/wipes, will be provided by the parents/carers.

There are designated areas providing a suitable place for the changing of children.; in school this is the disabled toilet facility and in Pre-school there is a changing station in the children's toilet block.

Health Care Plans

The Health Care Plan pro forma must be used to record the needs of each individual child who requires continence management, along with actions to be taken agreed by the setting and the parent/carer. If a health professional and/or school nurse is involved with the child, then they should also be involved in the drawing up of the Health Care Plan.

Any change to the plan, including changes of staff, should be notified to all parties signing the plan.

A record of intimate care should also be kept. The setting should send a copy of the plan to any health professionals involved with the child for comment.

The plan should be completed taking into account the following partnership working principles:

The parent should:

- Agree to change the child at the latest possible time before bringing him/her to the setting.

- Provide the setting with spare nappies/pads, wipes, nappy sacks and a spare set of clothes.
- Understand and agree the procedures that will be used when the child is changed at the setting.
- Agree to notify the setting if the child's needs change at any time which needs to be reflected in the Health Care Plan.
- Agree to attend Health Care Plan review meetings.

The setting should:

- Include the following in the child's Health Care Plan; frequency of changing, taking into consideration their individual needs.
- Agree to record frequency of changes throughout the day, including any information on rashes or marks, which is to be shared with the parent/carers on a daily basis.
- Agree to review arrangements as and when necessary and as a minimum at six monthly intervals.

Written Guidelines for Staff

- Only persons with a suitable Disclosure and Barring service (DBS) clearance will be allowed to change or toilet-train children.
- Students and volunteers will not be allowed to change or toilet-train children.
- Children will be changed in a private, designated area which complies with Health and Safety regulations. Although this area is private the member of staff can still be easily seen and heard by other staff members.
- All members of staff will inform another member of staff in the setting prior to taking a child to be changed or to use the toilet.
- A child will never be left alone on the changing mat.
- The child's privacy will be respected at all times during changing.
- Staff should ensure that nappy changing is relaxed and a time to promote independence in young children.
- Staff will wear clean disposable gloves for each child.
- The designated area/mat will be cleaned with a suitable cleaner before and after a child is changed.
- Appropriate hand washing facilities will be available for the adult and the child and hands will be washed using soap and dried thoroughly with a paper towel after completing the procedure.
- A record of the change of nappy/pull-up/ clothes will be recorded in the changing book stating time and date changed, child's name and name of adult who changed child, it will also be recorded if the child had a toileting accident or routine nappy change.

Hygiene

Hygiene procedures are important in protecting children and staff from the spread of infection; the necessary equipment will be provided to ensure that this happens.

- All staff are aware of the procedures for avoiding infection and must follow basic hygiene procedures.
- Protective gloves and an apron should be worn at all times and disposed of in the appropriate bin after use.
- Changing mats and tables must be cleaned thoroughly between each use with the appropriate cleaning materials.
- Any spillages should be cleaned immediately using the appropriate cleaning materials.
- Where possible, soils and spills should be disposed of down the toilet.
- Dirty nappies/pants will be bagged and returned to parents/carers when the child is collected. Disposable nappies/pull-ups will be bagged and placed in nappy bin in pre-school.
- Soiled clothing should be bagged, unwashed, and sent home with the child.

Note: where it is known that the child is infected with a blood born virus all materials should be double wrapped in yellow clinical waste bags and arrangements made for the waste to be removed for incineration.

Review

The effectiveness of this Policy and our practice will be evaluated every two years by the Senior Leadership Team.

The Head Teacher will inform the Governing Body of any incidents relating to the details in this Policy.

Links to other Policies

- Early Years
- Educational Visits and School Trips
- Safeguarding
- SEND
- Supporting Pupils with Medical Conditions



Health Care Plan for xxxxx

Name	Date of birth	Emergency contact number
Identified need		
Resources – provided by parent / carer		
Resources – provided by setting / school		
<p>Action to be taken</p> <ul style="list-style-type: none"> - Where continence management changing will take place - What resources will be used; including cleansing agents/creams - How the nappy/pad will be disposed of - What infection control measures are in place - What the members of staff will do if the child is unduly distressed - What the procedures are if marks or injuries are noticed on the child - What the recording procedures are and how they are used to evaluate the continence management of the child 		
Staff involved		
Additional Information		
Signature of parent / carer and child (if appropriate)		
Signatures of school staff named above		
Signature of school nurse / health professional (if appropriate)		
Date:		Review date:



Record of Care for xxxxxx

Date	Time	Changed: Nappy (N) Pull Ups (PU) Pants (P)	Staff	Comment (inc any clothing provided)	Signature of Staff

--	--	--	--	--	--

