



Woodrow First School

Toileting and Intimate Care Policy

Signed by:	
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Toileting and Intimate Care Policy

Introduction

Woodrow First School and Nursery is aware that all learners need open access to clean, well-stocked and safe toileting provision and that some learners may require assistance from members of staff for personal care, including toileting, either due to the age and developmental level of the student, or as a result of disability or medical need.

The main aim of the school is to ensure that our learners are safe, secure and protected from harm. Woodrow First School and Nursery also recognises that not only is it in the best interests of the whole school community to maintain clean, hygienic toilet facilities, but that it is everyone's responsibility to help ensure that they remain this way.

Aim

The toileting and intimate care policy aims to provide a clear framework for staff to ensure the safety and dignity of all learners when using the toilet and for those who need support with personal care, including toileting and continence management. It will also clarify for learners and their families the support they can expect from school.

Principles

Woodrow First School and Nursery respects our learners and encourages them to achieve their potential. This includes encouraging them to be as independent as they are able with their personal care. We will ensure that our learners are:

- Treated as individuals
- That their right to safety, dignity and privacy is respected
- Involved with and consulted about upkeep of the toilet facilities and about their personal care (where appropriate)
- Provided with consistency of care as far as possible

School responsibilities

- We will work with the whole school community to ensure access to clean, well-stocked private and safe toilet facilities for all.
- We will work with learners, parents/carers to promote bladder and bowel health and maximum possible continence.
- Where learners are not able to be fully continent, we will ensure that individual permissions and routines are established with parents (Appendix A – Intimate Care and Nappy Changing – Parental Permission). The learner will be included in discussions about the care procedure, unless this is clearly inappropriate. This will be reviewed regularly in school and with parents as the child develops.
- If an individual needs more in depth support, for example, due to a more in depth complex medical need, relevant healthcare professionals including the school nurse

may also be consulted. An extended health care plan will be established and shared with all members of staff and professionals working with the child, the child's family and the child, if appropriate (Appendix B – (Appendix 1 -Individual Health Care Plan) Medical Needs Policy). The health care plan will be reviewed at least annually or sooner if the learner's needs change.

- At any point, all member of employed school staff may be required to support an individual with intimate care. School will ensure that anyone who undertakes intimate care is an employee of the school and has had appropriate safeguarding checks in line with the school safeguarding policy and supporting statutory documentation.
- For children who have agreed an intimate care procedure with school (Appendix A) a core group of staff will be available to deliver this care. Staff will ensure that the individual has a positive relationship with each member of the core team to support the delivery of intimate care.
- For children with an individual care plan (Appendix B) only those staff named on the individual care plan will be involved in providing support with intimate care to a learner. School will ensure that sufficient staff are named on care plans and available to provide the required support in all foreseeable circumstances. If, in exceptional circumstances, none of the named staff members for an individual are available, school will contact the family for consent to involve a different member of staff or ask parents to support at school.
- In an emergency, staff may undertake intimate care that has not been agreed with the parents/carers. This act of care would be reported to the child's class teacher and to the parents/carers as soon as possible after the event. The reasons for this and the care undertaken would be documented by the staff member who has delivered the care.

Intimate care will take place in either the Nursery or Reception bathroom areas or the bathroom management area in the main school. If lay down, children will be supported by appropriate changing facilities. For older children they may be supported while standing up.

Unless stated on an individual care plan, "there are no regulations that state that a second member of staff must be available to ensure that abuse does not take place." Worcestershire County Council: Contenance Policy for Local Authority Early Years and Education Settings (2012)

All members of staff will follow the same procedure to avoid cross contaminations when supporting a child with intimate care, unless stated otherwise in their care plan. (Appendix C)

A written record will be kept of all support with intimate care (Appendix D). This will include the date and time of the care, who was present and any care given that has differed from the care plan, together with the reason for this.

Any changes in the learner's behaviour or appearance will be documented and reported to the DSL in line with the safeguarding policy.

Staff will communicate carefully with learners, using their usual communication method, to discuss their needs and preferences. Wherever possible the learner's wishes and preferences will be taken into account.

School will take into account the religious views, beliefs and cultural values of the learner and their family, as well as the learners gender identification and individual physical needs (e.g. periods, catheterisation, stoma care etc) as far as possible in provision of appropriate toileting facilities and when undertaking or supporting required individual personal care.

School will work with all learners to promote positive self-esteem and body image and independence with self-care as far as is appropriate and practical.

School will ensure that all staff are aware of the need for confidentiality. Personal and sensitive information will only be shared with those who need to know.

School will act according to their safeguarding policy and procedures if there are any concerns for the learner's wellbeing.

Governors responsibilities

To ensure there are appropriate toileting facilities to meet the needs of all their learners, including those with bladder and bowel health issues

To ensure that sufficient staff are trained to meet the needs of their learners.

The governing body will ensure that this policy is monitored and reviewed at least every three years.

Parent/carer responsibilities

Parents/carers must ensure that they provide all relevant information to school, as soon as possible, so that the needs of their child can be met. This includes the nature of their child's needs, details of any healthcare professionals involved including specialist nurses, as well as any changes in their medication, care or condition.

Parents/carers must ensure that they work towards their child achieving the maximum possible level of independence at home.

Parents/carers should work with school to develop and agree a procedure or care plan.

Parents/carers must make sure that school always has required equipment available for their child's intimate care or toileting needs.

Parents/carers must ensure that school always has their emergency contact details.

Learner responsibilities

To respect the toileting space and others use of that space and right to privacy.

To let school staff know if there is a problem with respect to the toileting/intimate care spaces

To be as involved as possible in their intimate care and with their care plan.

To let school staff know when they are aware that they need assistance.

To let their parent/carer or a trusted member of school staff know if they have any concerns or feel uncomfortable at any time.

Related documentation

When reading this policy please be aware of and refer to the following related documents:

- Safeguarding Child Protection Policy
- Special Educational Needs and Disabilities Policy (SEND)
- Medical Needs Policy
- Health and safety Policy
- Foundation Stage Policy
- Positive Handling Policy
- Data Protection Policy



Intimate Care and Nappy Changing – Parental Permission

Name of child.....

Date of Birth.....

Details of intimate care

needed:.....
.....
.....
.....
.....

I give permission for staff at Woodrow First School to change my child’s nappy and clothing (if needed) during the school day. Intimate care will be given in line with the schools Toileting and Intimate Care policy which can be found on the school website.

I agree to provide a change of clothes, including shoes and socks, new nappies, wipes and nappy sacks and replenish these when needed.

I also agree to support my child’s development of their toileting skills at home and communicate any changes with the class teacher so these can be replicated in school as best as possible.

Name.....

Signature.....

Date.....



Woodrow First School

Individual Health Care Plan

Name of school/setting

Child's name

Group/class/form

Date of birth

Child's address

Medical diagnosis or condition

Date

Review date

Family Contact Information

Name

Phone no. (work)

(home)

(mobile)

Name

Relationship to child

Phone no. (work)

(home)

(mobile)

Clinic/Hospital Contact

Name

Phone no.

G.P.

Name

Phone no.

Who is responsible for providing support in school

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Appendix 1 – Individual Health Care Plan
(Appendix B – Toileting and Intimate Care Policy)

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc.

Name of medication, dose, method of administration, when to be taken, side effects, contra-
indications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc.

Other information

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (*state if different for off-site activities*)

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to



Procedure for dealing with nappy or soiled clothes changing to avoid cross contamination:

1. Staff are to wash their hands thoroughly.
2. Put on new disposable apron and gloves.
3. Child should be asked to lie down on the bed / changing table if appropriate, an older child may be more comfortable standing up
4. Child can assist where appropriate to support their continence independence
5. Change child's nappy/pad/clothing
6. Put soiled nappy/pad in nappy sack (or in an emergency a plastic bag) and tie.
7. Place soiled clothes in a nappy sack or plastic bag and tie.
8. Wash hands with gloves still on.
9. Spray and wipe the changing mat or soiled area with appropriate cleaning agent.
10. Mop and clean the soiled area with a red mop bucket if needed.
9. Put wipes, nappy/pad, sack, apron and gloves into a plastic bag
10. Wash hands again
11. Dispose of the plastic sack in the appropriate school/setting waste
12. Wash hands again and ensure the child washes hands before being returned to class/setting

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.

This procedure should be displayed in all areas where nappy changing will take place

Taken from Worcestershire County Council Continence Policy – 2012

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