

Intimate Care Policy 1-18

Contents

1. [Guiding Principles](#)
2. [Rationale](#)
3. [Aims and Objectives](#)
4. [Intimate Care](#)
5. [Parental responsibility](#)
6. [Expectation of parents](#)
7. [Staff responsibilities](#)
8. [Special Educational Needs and Disability \(SEND\)](#)
9. [Child Protection](#)
 - [Annex 1](#)
 - [Annex 2](#)

1. **Guiding Principles**

The safety and welfare of all our pupils at the Stephen Perse Foundation (the **Foundation**) is our highest priority. The Foundation will follow the procedures laid down by our own Local Authority (**LA**) (which is Cambridgeshire for all schools in the Foundation apart from Dame Bradbury's where Essex is the LA) together with the guidance contained in [Keeping Children Safe in Education 2022](#).

This Intimate Care Policy applies to all schools of the Foundation. It is applicable to all pupils, including children in the Early Years Foundation Stage (**EYFS**).

2. **Rationale**

The Foundation is committed to safeguarding and promoting the welfare of all its pupils. 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. The Intimate Care Policy regarding children has been written to help safeguard children and staff, and applies to all staff involved in the intimate care of children.

Intimate care is any care which involves washing, touching or carrying out a procedure (such as cleaning up after a child has soiled him/herself), that most children can do for themselves, but with which some are unable to do due to physical disability, special educational needs associated with learning difficulties, medical needs, or needs arising from the child's stage of development. Intimate care includes hands-on physical care in personal hygiene and physical presence or observation during such activities, dressing and undressing, and the application of medical treatment other than to arms, face and legs below the knee.

3. **Aims and Objectives**

The aims are:

- To provide guidance and reassurance to staff and parent/s.
- To safeguard and respect the dignity, rights and wellbeing of children.
- To ensure that privacy is appropriate for the age and situation of the child concerned.
- To encourage a child's independence as far as possible in his/her intimate care.
- To explain to the child what s/he needs to do and, if staff support is needed, explain how the member of staff is going to help.
- To assure parents that staff members are knowledgeable about intimate care and that pupils' individual needs and concerns are taken into account.

4. Intimate Care

4.1. *Nursery children aged 1-3*

Intimate care arrangements will always be discussed with parents/carers before a child's start date. This will include nappy changing, disposal of cloth nappies and preferred choice of nappies, creams and wipes/alternative methods of cleansing such as water only. Where possible, one child will be cared for by one adult, unless there is a sound reason for having two adults present. If there are two adults involved in the intimate care of a child, the reasons should be clearly logged in the MIS or in the child's Tapestry individual care plan. If there is a temporary need for two adults to be present for example when a child is settling in a Nursery and they require distracting during nappy changes this needs to be discussed with the parents and added to the child's All About Me section of Tapestry. Nursery parents are informed about the intimate care that is given to their child via Tapestry care diaries.

The Foundation's nappy changing procedure is always adhered to (see Annex 1).

By the end of Nursery and the Rising 3's class, we encourage children to be fully toilet trained, as appropriate to their age, but we support parents on an individual basis where they are transitioning (see Annex 2).

4.2. *Children aged 3-7*

We will inform parents of all children prior to them starting school of the current Intimate Care Policy, highlighting that we will change children for odd 'accidents' but not routinely as part of day to day personal care. The expectation is that by the end of Reception children will be able to "manage their own basic hygiene and personal needs successfully, including dressing and undressing and going to the toilet independently". If a pupil soils or wets him/herself a member of staff will support them in cleaning themselves and changing into their own or borrowed spare clothes. We will supply warm water and cotton wool or baby wipes and plastic bags for soiled clothes. A member of staff will be on hand to support the pupil verbally. If further physical support is needed another member of staff will be called for safeguarding purposes. If continued support is needed and the soiling is not an 'odd accident' the pupil may require an intimate care plan in line with our SEND policy.

4.3. *Pupils aged 7-11*

Any pupil who soils or wets him/herself will not be changed by a member of staff unless specific written permission has been given by parents. We will provide a private, safe space where the pupil may change on their own. We will supply warm water and cotton wool, clean clothes (preferably the pupil's own) and plastic bags in which to put any soiled clothes.

4.4. *Students aged 11-18*

We will provide a private, safe space where the student may change on their own. We will supply warm water and cotton wool, clean clothes (preferably the student's own) and plastic bags in which to put any soiled clothes.

- 4.5. On occasion, if students require additional support over a period of time an intimate care plan will be established with the student and parents.

5. Parental responsibility

Partnership with parents is an important principle in any educational setting and is particularly necessary in relation to pupils needing intimate care. Much of the information required to make the process of intimate care as comfortable as possible is available from parents. Parents should be encouraged and empowered to work with staff to ensure their child's needs are identified, understood and met. This might include involvement with health care plans or any other plans which identify the support of intimate care where appropriate. Parents should ensure that all information given to the Foundation is up to date.

6. Expectation of parents

Parents/carers will endeavour to ensure that their child is continent before admission to school at Kindergarten age, unless the child has additional needs.

Parents/carers will discuss any specific concerns with staff about their child's toileting needs, and staff will work with parents/carers to ensure that the child is encouraged and praised where needed, when using the toilet.

Parents/carers must inform the school if a child is not fully toilet-trained before starting Kindergarten, after which a meeting will then be arranged to discuss the child's needs (see Annex 2).

Parents accept that on occasions their child may need to be collected from school as the result of soiling.

7. Staff responsibilities

Intimate care routines should always take place in an area which protects the child's privacy and dignity. In the EYFS, this should always be within hearing or sight of another member of staff. Children's intimate care routines should always be carried out by an appropriate member of staff, at the discretion of the Head of School and with regard to the age and developmental needs of the child. The Nursery Manager oversees the practice of intimate care in the Nursery classes to ensure consistency of practice and to avoid over-familiar relationships from developing. Appropriate support and training should be provided when necessary.

The following steps will be taken to ensure the health and safety of both staff and children:

1. Alert another member of staff.
2. Escort the child to a changing area, such as the designated nappy changing area/toilet

areas.

3. Collect any equipment and clothes.
4. All adults should wear gloves. Nursery staff wear protective gloves and aprons for nappy changes and administering intimate care.
5. The child should undress as appropriate and clean themselves as much as possible, under the verbal guidance of an adult if needed.
6. If a member of staff has any concerns about physical changes in a child's presentation, e.g. marks, bruises, soreness etc they will immediately report concerns to the appropriate person for safeguarding and child protection. A clear record of the concern will be completed and referred on if necessary (see the Foundation's Safeguarding and Child Protection Policy).
7. Staff will always talk to the child about what they are doing and give choices where possible.
8. Staff are responsive to a child's reactions. If a child becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be looked into and outcomes recorded. Parents/carers will be contacted at the earliest opportunity as part of this process, in order to reach a resolution. The child's needs will remain paramount. Further advice will be taken from outside agencies if necessary.
9. Staff encourage the child to have a positive body image of their own body as we believe that confident, assertive children who feel their body belongs to them are less vulnerable to abuse.
10. Used nappies are disposed of in the designated area for this.
11. Soiled clothes should be placed inside plastic bags (double wrapped) and given to parents/carers at the end of the day. Plastic aprons and gloves should be wrapped before disposal.
12. Children are expected to dress themselves in clean clothing, wash their hands and return to class.
13. The area must be cleaned and disinfected by an adult before anyone else is allowed access to it.
14. Adults, and the child where required, should wash their hands thoroughly after administering intimate care.

Intimate care incidents must be recorded including date, time, name of child, adult(s) in attendance, nature of the incident, the support required, action taken and any concerns or issues, in the MIS. This will enable staff to monitor progress made.

Parents/carers of children of any age requiring support should be informed, as soon as possible, via iSAMs or via Tapestry Care Plans for children in nursery.

8. Special Educational Needs and Disability (SEND)

The Foundation recognises that some children with SEND and/or other home circumstances may result in children arriving at school with underdeveloped toileting skills. If a child is not toilet trained because of a disability, their rights to inclusion are additionally supported by the Special Educational Needs and Disability Act 2001 and Part IV of the Disability Discrimination Act 1995.

If a child's toileting needs are substantially different from those expected of a child their age, then the child's needs may be managed through an Individual Healthcare Plan or similar. A toileting programme would be agreed with parents as advised by a health professional. Intimate care arrangements will be discussed with parents/carers on a regular basis, and any agreed plan would be regularly reviewed.

9. Child Protection

The Foundation's Safeguarding and Child Protection Policy applies to intimate care procedures, and staff members are expected to be vigilant regarding adherence to the policy.

Please refer to:

Safer Recruitment Policy

Safeguarding and Child Protection Policy

Reviewed: November 2022

Version Control

| | |
|-------------------------------------|-------------------------------------|
| Date of adoption of this policy | 5 November 2020 |
| Date of last review of this policy | 3 November 2022 |
| Date for next review of this policy | Autumn Term 2023 |
| Policy owner | Head of Early Years |
| Authorised by | Vice Principal and Heads of Schools |

Annex 1

DETAILS OF INTIMATE CARE PROCEDURES IN NURSERY, EARLY YEARS AND KEY STAGES 1 & 2

Nappy changing procedure

The Foundation's nappy changing procedure is written in compliance with Ofsted Early Years Foundation Stage statutory framework and carried out in accordance with the family's requests and consistent with the children's physical and emotional abilities.

Methods

A child's nappy must be changed promptly when wet or soiled. Staff must wear disposable gloves on both hands and a disposable apron for all nappy changes and a new set of gloves and apron must be worn for each child. Both the child and the staff member must wash their hands after changing a nappy. There is a designated nappy changing area which is away from the food preparation area and children must never be left on a changing mat.

Procedure

1. Staff should ensure that they signal their intention to change a child's nappy before doing so, as appropriate to their level of development.
2. Ensure you have a clean nappy, wipes and any other supplies such as cream before changing the child.
3. Put a new set of gloves and a new disposable apron on for each child and each nappy change.
4. Wash and dry the child using the appropriate washing materials, such as wipes or cotton wool. The washing materials used should be in accordance with the parents preferences as agreed before the child starts attending the nursery. Using the wipes or the cotton wool and warm water, wipe the genital area front to back.
5. Each child should have their own cream in a named tub. If parents wish to provide an alternative cream they may do so. This needs to be named and in the original pot and instructions for use followed. If prescribed a relevant medication permission form is to be completed and the staff member must check this before they change the child.
6. Put on a clean nappy. The child may need a new set of clothes as well. Nappies will be provided by the Foundation but these may be supplied by parents, if it is their preference.
7. Ensure the child is fully engaged by talking and singing with them.
8. Place the nappy cream back and other specific products provided by the child's parent(s) in the child's bag or basket.
9. The adults and child's (if applicable, subject to their age) hands should be washed thoroughly with liquid soap and running water. Hands should be dried on a disposable paper towel and antibacterial hand gel used.
10. Spray the changing unit with antibacterial spray and use disposable blue roll to clean the changing table ready for the next person to use.
11. Record all nappy changes on a child's nappy chart and complete a record via Tapestry Care Plan.
12. If reusable nappies are to be used this will be in consultation with the staff team.

13. Any soiled reusable nappies or clothing should be rinsed well and placed in a named bag for the family to take home.
14. If soiled items are left behind at the end of the day these should be put through the wash.

Intimate Care procedures for children who are toilet trained or transitioning to toilet training

1. **WETTING:** In EYFS, if children wet themselves clean clothes (preferably from their own spares bag) are offered. The child is encouraged to take off their wet clothes, wipe him/herself and change. Where a child is very distressed or is a 'rising three' then staff do, in exceptional circumstances, take off the wet clothes, offer him/her a wipe, and help the child to wipe him/herself. Wet clothes are put in a plastic bag and stored until the end of the day (in the child's bag in the Nursery and Early Years, in the Reception store cupboard at the Junior School Fitzwilliam Building, and in the medical room at Dame Bradbury's) then attached to their school bag so that it is not forgotten at the end of the day.

In Key Stages 1 & 2, if children wet themselves they are offered clean underwear and they change into their PE kit themselves. Staff offer a wipe and talk them through wiping themselves and changing. Wet clothes are put into a carrier bag, which is sealed by knotting and taken home at the end of the day.

2. **NORMAL SOILING:** Procedure is as for wetting (see 1). The staff offer support and talk through with the child, but there is no physical contact. In the EYFS, if a child soils him/herself a member of staff will encourage the child to take off his/her own clothes. Staff wear disposable gloves and double bag the soiled clothes which is labelled with the child's name and then put in his/her book bag to go home at the end of the day. Children are encouraged to be as independent as possible, but if a child is very distressed or a 'rising three' the staff might clean his/her bottom using wet wipes. Staff will change the child into his/her own spare clothes if possible, or school spare clothing.
3. **MESSY SOILING ("UPSET TUMMY"):** Staff talk through with the child to support him/her. The child cleans him/herself as well as possible. Parents are called if the child is poorly and the child waits in the medical room under the supervision of a member of staff. If this level of cleaning is insufficient, parents/carers are called to avoid intimate touching. Parents/carers will then collect the child and/or discuss and give written permission for staff to deal with the situation if it involves intimate care. This is particularly important for the number of children who might be in the medical room for a reasonable period of time because parents are both working.

A Record of Intimate Care is completed in the Foundation MIS (iSAMs) and parents are informed via iSAMs.

A member of the office staff informs Estates of any cleaning requirements.

Important: Staff will always ensure that another member of staff is present for any situation in which intimate care might be needed.

Annex 2
TOILET MANAGEMENT PLAN

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

Name of Support Staff Involved.....

Area of need.....

Equipment required.....

Location of suitable toilet facilities.....

Support required.....

Frequency of support.....

Working towards Independence

Child will try to

Personal Assistant will do.....

Target Achieved.....

Review Date.....

Parents/Carer.....

Child (if appropriate).....

Personal Assistant.....

Senior Management/SENCo.....

Date.....