

Sir James Knott Nursery School



Intimate Care Policy

“Creating strong and lasting foundations for learning”

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| Designated member of staff's responsibility: | Mr Croft- Headteacher |
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Intimate Care Policy

Policy Statement

Sir James Knott Nursery School aims to support children's care and welfare on a daily basis in line with their individual needs. All children need contact with familiar, consistent carers to ensure they can grow confidently and feel self-assured. At times children need to be cuddled, encouraged, held and offered physical reassurance. Our purpose is;

- To safeguard the rights and promote the best interests of the children.
- To ensure children are treated with sensitivity and respect, and in such a way that their experience of intimate care is a positive one.
- To safeguard adults required to operate in sensitive situations.
- To raise awareness and provide a clear procedure for intimate care.

This policy sets out clear principles and guidelines on supporting intimate care with specific reference to toileting. This intimate care policy should be read in conjunction with the following;

- Child Protection Policy
- Special Educational Needs and Disabilities Policy
- Supporting Pupils at school with Medical Conditions Policy
- Health and Safety Policy

This policy supports the safeguarding and welfare requirements of Early Years Foundation Stage (EYFS) 2017.

The Governing Body will act in accordance with Section 175 of the Education Act 2002 and Keeping Children Safe in Education (September 2018) to safeguard and promote the welfare of pupils at this school.

Sir James Knott Nursery School takes seriously its responsibility to safeguard and promote the welfare of the children and young people in its care. Meeting a pupil's intimate care needs is one aspect of safeguarding.

The Governing Body recognises its duties and responsibilities in relation to the Disability Discrimination Act 2005 which requires that any child with an impairment that affects his/her ability to carry out day-to-day activities must not be discriminated against. The Disability Discrimination Act 2005 now only applies in North Ireland. England, Scotland and Wales are covered by the Equality Act 2010.

We work with parents towards toilet training unless there is a medical or other developmental reason why this may not be appropriate at the time. 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. The school will share policy and

procedures for dealing with children's general toileting needs with parents or carers. It is important that there is a positive dialogue between home and school about strategies in use with the child so that these can be reinforced as appropriate. There will be an intimate care policy parental agreement form which will be completed by each family to give permission for intimate care. (*Appendix 1*)

Principles

It is the right of the child to be treated with sensitivity and respect, and in such a way that their experience of personal care is a positive one. As far as possible the child should be allowed to exercise choice and should be encouraged to have a positive image of their body.

There should be recognition that toileting support can involve risks for both the child and any adults in attendance.

Intimate Care Tasks – cover any task that involves:

- Dressing and undressing
- Washing including intimate parts
- Helping someone use the toilet
- Changing nappies
- Carrying out a procedure that requires direct or indirect contact to an intimate personal area.

Procedures

Nursery

In Nursery we recognise that children will join us having reached differing levels of independence and development in toileting and self-care;

- Key Persons/teachers have a list of personalised changing times for the children in their care who are in nappies or 'pull-ups'. This is shared with parents daily (*Appendix 2*)
- Children are changed whenever the need arises. Children not left in wet/soiled nappies or clothing.
- Children from 2 years old should wear 'pull-ups' or other types of trainer pants as soon as they are comfortable with this idea and their parents are in agreement.
- Key persons/teachers undertake to change children in their key groups, a secondary key person/teaching assistant will change them if the key person/teacher is absent.
- Changing areas are warm and there are safe areas to lay children on if they need to have their bottoms cleaned.
- Each child has their own nappies, 'pull-ups' and wipes accessible in a clearly labelled bag in the cloakroom area.
- Gloves and aprons are put on before changing commences and the areas are prepared.
- A clean and comfortable changing mat is used in the changing area for each child.
- All staff are familiar with the hygiene procedures and carry them out when changing nappies or 'pull-ups'.

- Key persons recognise that nappy changing is relaxed and a time to promote independence in young children. They avoid pulling faces or making negative comments about nappy contents or the child.
- Nappies and 'pull-ups' are disposed of hygienically. Soiled clothing is bagged for parents to take home and placed in each child's bag in the cloakroom area.
- Young children are not left in soiled or wet nappies, 'pull-ups' or pants as we have a 'duty of care' towards children's needs and this could be interpreted as neglect.
- Creams and lotions, can only be applied with parent's consent. As instructed on the child's registration form. Any prescribed cream etc. can only be applied if the appropriate medication form has been completed.
- Changing area is left clean and ready for the next child.
- Children are encouraged to take an interest in using the toilet; they may just want to sit on the toilet at first.
- Older children can access the toilets whenever they have the need to and are encouraged to be as independent as possible.
- Children are reminded at regular times to go to the toilet.
- New children have a general 'induction' tour of the toilet to make them feel safe and comfortable.
- Children are encouraged to wash their hands after using the toilet and have soap and paper towels to hand.

However, we recognise that children develop at different rates;

- Some children will be engaged in fully developing this aspect of their self-care when they start school.
- Some children will not have had the practice that they need to use the facilities available: this could include culturally different expectations of self-care.
- Some children may start wetting or soiling themselves after they start school during the settling-in period. In these circumstances, the child's key person/teacher communicates sensitively with parents to determine if this is a temporary set-back (anxiety, arrival of new sibling, illness).

Some children will come to school with ongoing/specific physical or medical issues such as urinary tract infections or soiling difficulties. If the child requires a medical care plan, Local Authority policies on child protection and managing children's needs will be consulted.

Partnership with Parents/Carers – Staff/ Child's key person works in partnership with parents/carers to provide care appropriate to the needs of the individual child and together will produce a care plan. The care plan will set out:

- What care is required.
- Number of staff needed to carry out the task (if more than one person is required, reason will be documented).
- Additional equipment required.
- Child's preferred means of communication (e.g. visual, verbal). Agree terminology for parts of the body and bodily functions.
- Child's level of ability i.e. what tasks they are able to do by themselves.
- Acknowledge and respect for any cultural or religious sensitivities related to aspects of intimate care.
- Be regularly monitored and reviewed in accordance with the child's development.

Parents/Carers are asked to supply the following (delete as appropriate):-

- Spare nappies
- Wipes, creams, nappy sacks etc.
- Spare Clothes
- Spare underwear

Best Practice – When intimate care is given, the member of staff explains fully each task that is carried out, and the reason for it. Staff encourage children to do as much for themselves as they can, lots of praise and encouragement will be given to the child when they achieve. All staff working in early years setting has an enhanced DBS check. Particular staff members are identified to change a child with known needs and that they plan and record their work with that child.

Dealing with body fluids – Urine, faeces, blood and vomit will be cleaned up immediately and disposed of safely using the disposal bins provided. When dealing with body fluids, staff wear protective clothing (disposal plastic gloves and aprons) wash themselves thoroughly afterward. Soiled children's clothing will be bagged to go home – staff will not rinse it. Children will be kept away from the affected area until the incident has been completely dealt with. All staff maintains high standards of personal hygiene, and will take all practicable steps to prevent and control the spread of infection.

Sensitivity and Respect

- Each child will be spoken to by name and given explanations of what is happening.
- Privacy appropriate to the child's age and situation will be provided.
- The child will be encouraged to care for themselves as far as possible.
- Items of good quality, appropriately sized spare clothing will be readily available or provided by parents if the child has a medical condition which results in toileting accidents.
- Adults should be aware and responsive to the child's reactions.
- Some children refuse or are very reluctant for an adult outside of the family to care for them. In these circumstances special arrangements can be made for a family member to come in. The dignity of the child must be respected and so as much as can be kept confidential between child, school and parent is kept confidential.

Safeguarding Children and Adults

Anyone caring for children has a common law duty of care to act like any prudent parent. Staff ensure that children are healthy and safe at all times.

- Adults dealing with the toileting needs of children are employees of the school and have undergone enhanced DBS disclosure.
- All staff are aware of the school's protocol and procedures following an induction and are kept informed of updates via the school's designated safeguarding lead.
- All staff have received appropriate safeguarding training and will receive support where necessary.
- All toileting incidents must be reported straight away to the Head Teacher. The minimum information to be kept is the date and time, the name of the child, the

adult(s) in attendance, the nature of the incident, the action taken and any concerns or issues.

- The parents are informed as soon as possible and staff should have the opportunity to raise any concerns or issues.
- Leaving a child in soiled or wet clothing for any length of time, even if waiting for the arrival of a parent or carer, could be interpreted as a form of abuse.
- The normal process of cleaning a child should not raise child protection concerns, and there are no regulations that indicate that a second member of staff must be available to supervise the process to ensure that abuse does not take place. DBS checks are carried out to ensure the safety of the children with staff employed by the school. If there is known risk of false allegation by a child or parent, then a single member of staff should not clean a child unsupervised.
- Members of staff must ensure that they do not change or clean a child in a room with the door closed.

Health and Safety

In the case of a child accidentally wetting, soiling or being sick whilst on the premises:

- Staff should wear disposable gloves and aprons to deal with the incident.
- We provide flushable wipes and encourage the child to use them and to wash the private parts of their body.
- Ensure soiled clothing is double bagged and tied.
- Hot water and soap is available to wash hands as soon as the task is completed.

Roles and Responsibilities

Parents and carers are made aware of policies and procedures related to intimate care and all specific instances related to their child. If it becomes evident that a child has an ongoing problem that requires regular intimate care intervention, the school will make arrangements with the parent/carer for the long term resolution of the problem. This is likely to include a care plan that involves the parent/carer directly as well as external reference to a Health Care professional.

Advice and Support

There are other professionals who can help with advice and support. Family Health Visitors and Community Nursery Nurses have expertise in this area and can support adults to implement toilet training programmes in the home. Health Care Professionals can also carry out a full health assessment in order to rule out any medical cause of continence problem. Parents are more likely to be open about their concerns for their child's learning and development and seek help if they are confident that they and their child are not going to be judged for their delayed development.

Through the following actions discussed in this policy we will endeavor to support all parties;

- Promote consistent and caring relationships through the key person system in the nursery and ensure all parents/ carers understand how this works.
- All staff will be trained in the appropriate methods for intimate care routines and access specialist training where required, i.e. first aid training, specialist medical support.

- Conduct through inductions for all new staff to ensure they are fully aware of all nursery procedures relating to intimate care routines.
- Follow up on these procedures through supervision meetings and appraisals to identify any areas for development or further training.
- Staff will work closely with parents/ carers on all aspects of the child's care and education.
- Ensure all staff has an understanding of safeguarding/ child protection and how to promote all children from harm. This includes identifying signs and symptoms of abuse and how to raise these concerns in the most appropriate and speedy manner.
- Ensure all staff are trained in behaviour management techniques which include using restraint techniques where required. e.g. if a child is likely to hurt themselves or others.



Intimate Care Policy Parental Agreement Form

1. Intimate care is any care which involves washing, touching or carrying out an invasive procedure (such as cleaning up a pupil after they have soiled themselves) to intimate personal areas.
2. The issue of intimate care is a sensitive one and will require staff to be respectful of the child's needs. The child's dignity should always be preserved with a high level of privacy, choice and control. There shall be a high awareness of child protection issues. Staff behaviour must be open to scrutiny and staff must work in partnership with parents/ carers to provide continuity of care to children/ young people wherever possible.
3. The school is committed to ensuring that all staff responsible for the intimate care of children will undertake their duties in a professional manner at all times. The school recognises that there is a need to treat all children with respect when intimate care is given. No child should be attended to in a way that causes distress or pain.
4. The child who requires intimate care is treated with respect at all times; the child's welfare and dignity is of paramount importance.
5. The child will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each child to do as much for him/herself as he/she can. This may mean, for example, giving the child responsibility for washing themselves. Individual intimate care plans will be drawn up for particular children as appropriate to suit the circumstances of the child.
6. Each child's right to privacy will be respected. Careful consideration will be given to each child's situation to determine how many carers might need to be present when a child is toileted. Where possible one child will be catered for by one adult unless there is a sound reason for having more adults present.
7. The school maintains a record of who changes a child, how often this task is carried out, any comments/ actions taken, which member of staff was involved and the time.
8. Parents have a role to play when their child is still wearing nappies. The parent should provide nappies, disposal bags, wipes etc. and parents should be made aware of this responsibility. The school is responsible for providing gloves, plastic aprons, a bin and liners to dispose of any waste.
9. Staff will always wear an apron and gloves when dealing with a child who is bleeding or soiled or when changing a soiled nappy. Any soiled waste is to be placed in a polythene waste disposal bag, which can be sealed. This bag will then be placed in a bin (complete with a liner) which is specifically designated for the disposal of such waste.
10. Staff who administer first aid may invite another adult to be present. The pupil's dignity must always be considered and where contact of a more intimate nature is required.



Intimate Care Policy Parent Agreement Form

Should it be necessary, I give permission for _____ to receive intimate care (e.g. help with changing or following toileting).

I understand that staff will endeavor to encourage my child to be independent.

I understand that I will be informed discretely should the occasion arise.

Signed:

Print Name:

Date:

Appendix 2



Record of Intimate Care

| Name of Child | Date | Time | Comments/ Action Taken | Staff Involved | Signature |
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