

**Accessibility Policy**

This policy outlines the way that Middlethorpe Primary Academy provides access to education for pupils with a disability. A person has a disability if ‘ he or she has a physical or mental impairment which has a substantial and long-term adverse effect on his or her ability to carry out normal day to day activities.’ (Disability Discrimination Act 1995)

This policy has been set out in accordance with advice outlined in the DfES’s ‘Accessible Schools: Planning to increase access to schools for disabled pupils’.

Accessibility is addressed under the following six headings:

Admissions

Access to Buildings and Classrooms

Curriculum Access

Informal Curriculum

Information for Pupils and Parents

Development Targets

**Admissions**

The Governing Body and staff of Middlethorpe Primary Academy support the Special Educational Needs and Disability Act (2001). Therefore, the school is committed to the principles of inclusion, allowing access to education for all children, where this can reasonably be provided. It is important that the Headteacher is informed of the Special Educational Needs and/or a Record of Needs of any child as soon as possible so that the school can discuss appropriate arrangements. This is no later than the beginning of the term preceding a child’s entry to school in the Foundation Stage. Where transfers take place, the school is reliant on effective two-way communication with the child’s prior school. All cases are considered sympathetically and on an individual basis.

The admission of a child with Special Educational Needs will be conditional upon:

1. The parents’/carers’ full disclosure to the school of the child’s disability. Appropriate planning by the school, including requests for additional funding, is dependent on the school having access to all relevant information.
2. The following of procedures set out in any school policies relating to Special Educational Needs.
3. The availability of appropriate facilities within the school. These include both physical facilities and adequate curricular provision.
4. Specific additional funding from SEED, if necessary.

**Access to Buildings and Classrooms**

All doors into the school building and into each classroom are accessible to wheelchairs. The school is all on one level which makes it accessible for all pupils.

**Evacuation Procedures**

If required, the school’s evacuation procedures will be adapted to meet the specific needs of an individual. Such procedures will be discussed with the pupil and parents as well as on a whole school level so that all staff are aware of any amendments. They will be highlighted in the Individual Learning Plan for the pupil.

**Curriculum Access: Teaching, Learning and Assessment**

It is the aim of the school that wherever possible, all children will have access to a broad, balanced curriculum that builds upon their experiences.

Middlethorpe Primary Academy has successfully supported children with a range of disabilities, physical, behavioural and learning of varying degrees. These children have been included in both curricular and extra curricular activities. Approaches are adapted when necessary, based on a full assessment of the needs of the individual child.

Access to the curriculum is a key consideration throughout the school- on entry to the school, when crossing Key Stages or when a disability develops. These instances may be long term or temporary and the school plans support accordingly. Each child in this situation will be involved in the construction of an Individual Learning Plan (ILP) which is formally reviewed each term but reviewed informally as part of an ongoing process. This ILP aims to ensure that each child with a disability works towards targets to develop skills to support their inclusion.

Advice is sought from appropriate professionals beyond the school. Support can be provided in a variety of ways through the school’s staged intervention strategy outlined in the policy for Special Educational Needs.

* TA support (externally funded)
* Input from specialist teachers
* Technological enhancement
* Adaptation of teaching materials
* Specialist support programmes

The school now has a network of computers as well as sets of IPads. This provides access to ICT for all pupils in a variety of locations. Effective use of these facilities can support children with mobility difficulties and sight impairment.

In considering the school timetable the school gives sympathetic consideration to individual needs. The organisation of the classroom is planned for flexibility, considering furniture, resources and seating arrangements in order to facilitate access and learning.

Pupils at Middlethorpe Primary Academy have always been able to participate fully in a wide range of activities offered beyond the classroom, aiming to include children with disabilities wherever possible. These activities include:

* Outdoor education
* Sports
* Music
* Clubs and activities
* Excursions and trips

The suitability of any event and the need for additional support is discussed fully with parents in advance.

**Information for Pupils and Parents**

Parents are routinely involved in reviewing provision for their child. The child will also be involved depending on their reliability, and their willingness to participate. Other aspects such as maturity and sensitivity of the issue are considered when deciding on the child’s involvement.

Large print forms are readily available. The service of a sign language interpreter can be accessed to facilitate parental interviews.

If the pupils or parents have difficulty accessing information normally provided in writing by the school, such as handouts, newsletters, homework etc, then the school will be happy to consider alternative forms of provision.

**Policy date: September 2016**

**Review date: September 2019**

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**Policy date: September 2016**

**Review date: September 2019**

**Intimate Care Policy**

**2023 - 2025**

**Middlethorpe Primary Academy**

**Policy for Intimate Care**

Middlethorpe Primary Academy 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. Middlethorpe Primary Academy 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. At Middlethorpe Academy we recognise that all children have different rates of development and differing needs during their time at our school.

Most children achieve continence before starting full-time school. With the development of more early years’ education and the drive towards inclusion, however, there are many more children in mainstream educational establishments who are not fully independent. Some individuals remain dependent on long-term support for personal care, while others progress slowly towards independence.

The achievement of continence can be seen as the most important single self-help skill, improving the person’s quality of life, independence and self-esteem. The stigma associated with wetting and soiling accidents can cause enormous stress and embarrassment to the children and families concerned. Difficulties with continence severely inhibit an individual’s inclusion in school and the community. Children with toileting problems who receive support and understanding from those who act *in loco parentis* are more likely to achieve their full potential.

We are committed to ensuring that all pupils are able to access the whole curriculum and are able to be included in all aspects of school life. This includes providing suitable changes of clothing and attending to continence needs of our pupils where necessary.

**Aims**

* To support pupils in becoming fully independent in personal hygiene.
* To treat continence issues sensitively.
* To work with parents in delivering a suitable care plan where necessary.
* To ensure that staff changing children work within guidelines that protect themselves and the pupils involved (link to H&S Policy, Staff Code of Conduct and Child Protection Policy).

**Objectives**

To provide help and support to enable all children to become fully independent in their personal hygiene.

* To treat individual cases with sensitivity so as to maintain the self-esteem of the child.
* To liaise with parents and create a care plan agreement which details how home and school will work together to support individual pupils.
* To follow H&S guidelines (including the use of protective clothing for staff and the disposal of waste) when dealing with continence incidents.
* To provide suitable information to parents and staff on how incidents of continence will be dealt with.

**Our approach to best practice**

The management of all children with intimate care needs will be carefully planned. The child who requires intimate care is treated with respect at all times; the child's welfare and dignity is of paramount importance.

Staff who provide intimate care are trained to do so and are fully aware of best practice. Apparatus will be provided to assist with children who need special arrangements following assessment from physiotherapist/ occupational therapist as required.

Staff will be supported to adapt their practice in relation to the needs of individual children taking into account developmental changes such as the onset of puberty and menstruation. Wherever possible staff who are involved in the intimate care of children/young people will not usually be involved with the delivery of sex education to the children/young people in their care as an additional safeguard to both staff and children/young people involved.

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.

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. If this is the case, the reasons should be clearly documented.

Wherever possible the same child will not be cared for by the same adult on a regular basis; ideally there will be a rota of carers known to the child who will take turns in providing care. This will ensure, as far as possible, that over-familiar relationships are discouraged from developing, whilst at the same time guarding against the care being carried out by a succession of completely different carers.

Wherever possible staff should only care intimately for an individual of the same sex. However, in certain circumstances this principle may need to be waived where failure to provide appropriate care would result in negligence for example, female staff supporting boys in a primary school, as male staff are not always available.

Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the child's care plan. The needs and wishes of children and parents will be taken into account wherever possible within the constraints of staffing and equal opportunities legislation.

**The Protection of Children**

Education Child Protection Procedures and Inter-Agency Child Protection procedures will be adhered to. All children will be taught personal safety skills carefully matched to their level of development and understanding.

If a member of staff has any concerns about physical changes in a child's presentation, e.g. marks, bruises, soreness etc. s/he will immediately report concerns to the appropriate manager/ designated person for child protection.

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. Staffing schedules will be altered until the issue(s) are resolved so that the child's needs remain paramount. Further advice will be taken from outside agencies if necessary.

If a child makes an allegation against a member of staff, all necessary procedures will be followed (see Child Protection Policy for details).

**Health and Safety**

Health and Safety advice for schools can be found in the Health and Safety Policy.

**Further Guidance**

* ‘Working Together To Safeguard Children’, Inter-Agency Child Protection Procedures.
* Circular 10/95, Protecting Children from Abuse; The Role of the Education Service. DFEE
* www.dfes.gov.uk/publications/guidanceonthelaw/10\_95summary
* What To Do IF You’re Worried A Child Is Being Abused. Summary (2003) www.doh.gov.uk/safeguardingchildren/index.htm

**Children wearing nappies**

Child protection need not present an issue. It is good practice to provide information for parents of the policy and practice in the school. Such information will include a simple agreement form for parents to sign- outlining who will be responsible, within the school, for changing the child and when and where this will be carried out. This agreement allows the school and the parent to be aware of all the issues surrounding this task right from the outset.

We use a sheet to record who changes a child, the nature of the continence difficulty, as well as the date and time.

**Care Plans**

Where a pupil has particular needs (e.g. wearing nappies or pull-ups regularly, or has continence difficulties which are more frequent than the odd ‘accident’, staff will work with parents/carers (and health visitors/school nurse, if appropriate) to set out a care plan to ensure that the child is able to attend daily.

The written care plan (Appendix A) will include:

* Who will change the child.
* Where changing will take place.
* What resources will be used (cleansing agents used or cream to be applied?)
* How the product, if used will be disposed of, or how wet or soiled clothes will be kept until they can be returned to the parent/carer.
* What infection control measures are in place.
* What the staff member will do if the child is unduly distressed by the experience or if the staff member notices marks or injuries.

**Care Plan Agreements**

In these circumstances it may be appropriate for the school to set up an agreement that defines the responsibilities that each partner has, and the expectations each has for the other (see Appendix B). This will include:

**The parent:**

* agreeing to ensure that the child is changed at the latest possible time before being brought to the setting/school.
* providing the setting/school with spare nappies or pull ups and a change of clothing.
* understanding and agreeing the procedures that will be followed when their child is changed at school –including the use of any cleanser or wipes.
* agreeing to inform the setting/school should the child have any marks/rash.
* agreeing to a ‘minimum change’ policy i.e. the setting/school would not undertake to change the child more frequently than if s/he were at home.
* Agreeing to review arrangements should this be necessary.

**The school:**

* agreeing to change the child during a single session should the child soil themselves or become uncomfortably wet.
* agreeing how often the child would be changed should the child be staying for the full day.
* agreeing to monitor the number of times the child is changed in order to identify progress made.
* agreeing to report should the child be distressed, or if marks/rashes are seen
* agreeing to review arrangements should this be necessary.

This kind of agreement should help to avoid misunderstandings that might otherwise arise, and help parents feel confident that the setting/school is taking a holistic view of the child’s needs.

Should a child with complex continence needs be admitted, the school will consider the possibility of special circumstances and/or provision being made. In such circumstances, an appropriate health care professional (School Nurse or Family Health Visitor) will be closely involved in forward planning.

**Personal Care Procedures**

The staff at Middlethorpe Academy will follow agreed procedures (see Appendix C) when attending to the care or continence needs of any pupil within the setting, whether this be a child with a care plan agreement or a child who has had an occasional ‘accident’.

**Health and Safety Procedures**

When dealing with personal care and continence issues, staff will follow agreed health and safety procedures (see Appendix D) to protect both the child and the member of staff.

**Child Protection**

The normal process of changing continence or wet/soiled clothes 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 changing process to ensure that abuse does not take place. Few settings/schools will have the staffing resources to provide two members of staff for changing and DBS checks are carried out to ensure the safety of children with staff employed in our school. If there is known risk of false allegation by a child then a single practitioner will not undertake changing. A student on placement will not change a child unsupervised. Where ever possible, the same member of staff will be allowed to change named children. This reduces the risk to the child and promotes their dignity.

**Monitoring and Review**

* The lead person for the setting will take responsibility for monitoring that agreed procedures are being followed and are meeting the needs of children and families.
* It is the lead person’s responsibility to ensure that all practitioners follow the school policy.
* Any concerns that staff have about child protection issues will be reported to the Early Years leader and subsequently the Head Teacher for further referral if appropriate.

This policy runs alongside other school policies, particularly Safeguarding, Child Protection, SEN, and Health and Safety. It will be reviewed on an annual basis.

**Health and Safety**

Some schools are concerned about health and safety issues when staff are changing children or dealing with a child who has had an accident and is bleeding. Staff always wear gloves when dealing with a child who is bleeding or soiled or when changing a soiled nappy. Any soiled waste is placed in a polythene waste disposal bag, which can be sealed. This bag is then be placed in a bin (complete with a liner) which is specifically designated for the disposal of such waste. The bin is emptied on a weekly basis and it can be collected as part of the usual refuse collection service as this waste is not classed as clinical waste. Staff should be aware of the school’s Health and Safety policy.

**Special Needs**

Children with special needs have the same rights to safety and privacy when receiving intimate care. Additional vulnerabilities that may arise from a physical disability or learning difficulty must be considered with regard to individual teaching and care plans for each child. As with all arrangements for intimate care needs, agreements between the child and those with parental responsibility and the organisation should be easily understood and recorded.

Regardless of age and ability, the views and/or emotional responses of children with special needs should be actively sought (with advocacy arrangements made for those who can't) in regular reviews of these arrangements.

**Guidance to safeguard children and education staff with regard to situations which may lend themselves to allegations of abuse**

**(Physical contact, first aid, showers/ changing clothes, out of school activities, and photography)**

**Physical Contact**

All staff engaged in the care and education of children and young people exercise caution in the use of physical contact.

The expectation is that staff will work in ‘limited touch’ cultures and that when physical contact is made with pupils this will be in response to the pupil’s needs at the time, will be of limited duration and will be appropriate given their age, stage of development and background.

Staff are aware that even well intentioned physical contact might be misconstrued directly by the child, an observer or by anyone the action is described to. Staff are always prepared to justify actions and accept that all physical contact may be open to scrutiny.

Physical contact which is repeated with an individual child or young person is likely to raise questions unless the justification for this is formally agreed by the child, the organisation and those with parental responsibility.

Children with special needs may require more physical contact to assist their everyday learning. The general culture of ‘limited touch’ will be adapted where appropriate to the individual requirements of each child. The arrangements must be understood and agreed by all concerned, justified in terms of the child’s needs, consistently applied and open to scrutiny. Wherever possible, consultation with colleagues should take place where any deviation from the arrangements is anticipated. Any deviation and the justification for it should be documented and reported.

Extra caution may be required where a child has suffered previous abuse or neglect. In the child’s view, physical contact might be associated with such experiences and lead to staff vulnerable to allegations of abuse. Additionally, many such children are extremely needy and seek out inappropriate physical contact. In such circumstances staff should deter the child without causing them a negative experience.

**Restraint**

There may be occasions where it is necessary for staff to restrain children physically to prevent them from inflicting damage on either themselves, others or property. In such cases only the minimum force necessary should be used for the minimum length of time required for the child to regain self- control. In all cases of restraint the incident must be documented and reported. Under no circumstances would it be permissible to use physical force as a form of punishment, to modify behaviour, or to make a pupil comply with an instruction. Physical force of this nature can, and is likely to, constitute a criminal offence.

**Pupils in distress**

There may be occasions when a distressed pupil needs comfort and reassurance that may include physical touch such as a caring parent would give. Staff must remain self-aware at all times to ensure that their contact is not threatening or intrusive and not subject to misinterpretation.

Judgement will need to take account of the circumstances of a pupil’s distress, their age, the extent and cause of the distress. Unless the child needs an immediate response, staff should consider whether they are the most appropriate person to respond. It may be more suitable to involve the child’s relative or another member of staff.

Particular care must be taken in instances which involve the same pupil over a period of time.

Where a member of staff has a particular concern about the need to provide this type of care and reassurance they should seek further advice, from their line manager or other appropriate person.

**First Aid and intimate care**

Staff who administer first aid should ensure wherever possible that another adult or other children are present. The pupil’s dignity must always be considered and where contact of a more intimate nature is required (e.g. assisting with toileting or the removal of wet/soiled clothing), another member of staff should be in the vicinity and should be made aware of the task being undertaken.

Regular requirements of an intimate nature should be planned for. Agreements between the school/organisation, those with parental responsibility and the child concerned should be documented and easily understood. The necessity for such requirements should be reviewed regularly. The child’s views must also be actively sought and, in particular, any discomfort with the arrangements addressed.

**Physical Education and other skills coaching**

Some staff are likely to come into physical contact with pupils from time to time in the course of their duties when participating in games, demonstrating an exercise or the use of equipment.

Staff should be aware of the limits within which such contact should properly take place and of the possibility of misinterpretation.

Where it is anticipated that a pupil might be prone to misinterpret any such contact, alternatives should be considered, perhaps involving another member of staff or a less vulnerable pupil in the demonstration.

**Changing clothes**

Given the vulnerabilities of the situation, it is desirable that when supervising children in a state of undress, another member of staff is present. However, is not always be possible and therefore staff need to be vigilant about their own conduct, eg adults must not change in the same place as children or shower with children.

**Out of school trips, clubs etc.**

Employees should take particular care when supervising pupils in the less formal atmosphere of a residential setting or after-school activity. Although more informal relationships in such circumstances tend to be usual, the standard of behaviour expected of staff will be no different from the behaviour expected within school. Staff involved in such activities should also be familiar with their school’s/establishment’s policy and all LEA Guidance regarding out of school activities.

To ensure pupils’ safety, increased vigilance may be required when monitoring their behaviour on field trips, holidays etc. It is important to exercise caution so that a pupil is not compromised and the member of staff does not attract allegations of overly intrusive or abusive behaviour.

On occasions (field trips/days out, etc.) some pupils might be short of funds and would embarrassed or singled out if this were known. It would be acceptable for a member of staff to subsidise a child, provided that this was disclosed to colleagues.

Meetings with pupils away from the school premises where a chaperone will not be present, are not permitted unless specific approval is obtained from the head teacher or other senior colleague with delegated authority.

**Staff should not place themselves in a position where they are in a vehicle, house or other venue alone with a child unless completely unavoidable. In such a case a member of the SLT should be informed as soon as possible after the event if not possible beforehand.**

If staff come into contact with pupils whilst off duty, they must behave as though in their professional role and not give conflicting messages regarding their own conduct.

**Photography, videos and similar creative arts**

Staff should be aware of the potential for such mediums of teaching to be used for the wrong purposes. Additionally, children who have been previously abused in this way may feel threatened by the legitimate use of photography, filming etc. The potential for founded and unfounded allegations of abuse requires that careful consideration be given to the organisation of these activities.

Schools should have clear policies and protocols for the taking and use of images and of photographic equipment. These should require the justification and purpose of the activity; its content; avoidance of one to one sessions; appropriate privacy when the changing of clothes is required; and, arrangements for access to the material and its storage.

Consent to participating in these activities should be sought from the child and those with parental responsibility at the beginning of courses, but staff should remain sensitive to those children who appear particularly uncomfortable with the activity.

All material produced should be viewed for acceptability by another member of staff. Its circulation should be in accordance with the LEA’s/schools ‘Use of Images’ policy, and relevant arrangements with parents.

***APPENDIX A***

**Written Care Plan**

Name of child: ...................................................................

Name of person(s) to change the child: .........................................................

Where changing will take place: .................................................................

What resources will be used: .....................................................................

Disposal of product in: ................................................................................

Infection control measures: ........................................................................

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If the child is unduly distressed, a member of staff will contact the parent/carer.

*n.b. If the above named member of staff is not available due to illness or staff training, then another person, familiar to the child will attend to the child’s needs.*

***APPENDIX B***

**Care Plan Agreements**

**The parent:**

* I agree to ensure that the child is changed at the latest possible time before being brought to the setting/school
* I will provide the setting/school with spare nappies or pull ups and a change of clothing
* I understand and agree the procedures that will be followed when my child is changed at school – including the use of any cleanser or wipes
* I agree to inform the setting/school should the child have any marks/rash
* I agree to a ‘minimum change’ policy i.e. the school will not undertake to change the child more frequently than if s/he were at home.
* I agree to review arrangements should this be necessary

Signed: .................................................................................... (parent/carer)

**The school:**

* We agree to change the child during a single session should the child soil themselves or become uncomfortably wet
* We agree to monitor the number of times the child is changed in order to identify progress made
* We agree to report should the child be distressed, or if marks/rashes are seen
* We agree to review arrangements should this be necessary.

Signed: ........................................................................................ (school member of staff)

Date: ....................................................................................

***APPENDIX C***

**Personal Care Procedures**

The staff at Middlethorpe Academy will follow agreed procedures:

* Change the child’s clothing as appropriate, as soon as possible.
* Use appropriate cleaning products and adhere to health and safety procedures (see Appendix D).
* Report any marks or rashes to parents and Head Teacher if appropriate.
* Inform parent/carer that a continence issue has arisen during the session.
* Contact a parent/carer only where soiling is severe and/or linked to illness eg. sickness and diarrhoea, or when a child refuses to let a member of staff change their clothing.

***APPENDIX D***

**Health and Safety Procedures**

When dealing with personal care and continence issues, staff will follow agreed health and safety procedures:

* Staff to wear disposable gloves and aprons while dealing with the incident
* Soiled continence product used to be double wrapped, or placed in a hygienic disposal unit (identified bin in disabled toilet) if the number produced each week exceeds that allowed by Health and Safety Executive’s limit.
* Changing area to be cleaned after use
* Hot water and liquid soap available to wash hands as soon as the task is completed
* Paper towels available for drying hands.

***APPENDIX E***

**Procedures for changing children:**

*The process of changing a child must be done in a positive, happy environment, where the child feels relaxed. Before changing make sure you are aware of any particular needs of the individual child.*

* **Children must be changed in the Early Years or disabled changing area.**
* **Only Early Years and staff employed by Middlethorpe Primary Academy may change children (not students/helper).**
* **Ensure all items are within reach in the changing area.**
* **Staff must wash their hands prior to changing a child.**
* **Disposable gloves must be worn. New gloves must be used for each child.**
* **Children must not be left unattended. Ensure to take care and the child is safe at all times i.e be aware of slipping hazards**
* **Children must be washed using the shower facilities if necessary and be dried with a towel.**
* **Encourage the child to be as independent as possible e.g pulling up underpants, drying themselves etc.**
* **Check that the child’s outer clothing is clean. Change clothes if appropriate.**
* **Wet/soiled clothes must be placed in a bag. Personal items should be returned to the child’s bag.**
* **Wet/Soiled clothes bags must stay hung in the changing area on the hooks provided.**
* **Any wipes/ pull-ups must be wrapped in a plastic bag and placed in a sealed bin.**
* **Ensure the area is left clean and tidy. Mats or floor should be cleaned after use and sprayed using antibacterial spray.**
* **Ensure that the child washes their hands.**
* **Staff must wash their hands.**