

TOILETING AND INTIMATE CARE GUIDELINES

All children at St. Nicholas School have the right to be safe and be treated with dignity, respect and privacy at all times.

These guidelines should be considered in line with our Child Protection, Health and Safety, Staff Code of Conduct and Supporting pupils at School with Medical Conditions policies.

These guidelines support the safeguarding and welfare requirements of Early Years Foundation Stage (EYFS) 2017 and the Equality Act 2010. We will ensure that:

- No child's physical, mental or sensory impairment will have an adverse effect on their ability to take part in day to day activities.
- No child with a named condition that affects personal development will be discriminated against
- No child who is delayed in achieving continence will be refused admission
- No child will be sent home or have to wait for their parents/carer due to incontinence
- Adjustments will be made for any child who has delayed incontinence

Intimate Care Tasks – cover any tasks that involves the dressing and undressing, washing including intimate parts, showering (where appropriate) helping someone use the toilet, changing nappies or carrying out a procedure that requires direct or indirect contact to an intimate personal area e.g. changing a pupil for swimming.

Partnership with Parents/Carers – We work in partnership with parents/carers to provide care appropriate to the needs of the individual child and together will be added to the health care plan. The health care plan will identify any additional specific information required which falls outside these general guidelines, e.g:

- Where specific e.g. care is required e.g. catheterisation, stoma care etc.
- Number of staff needed to carry out the task if more than 1 or 2.
- Any additional equipment required.

Parents/Carers are asked to supply the following –

- Spare nappies
- Spare Clothes
- Spare underwear
- Any emollient or cleansing lotions to be applied as part of an intimate care routine must come from home (these *may* be listed in the Health Care Plan).

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. The level of support allocated to children / young people for their intimate care is based upon an individual assessment of the individual's

age, stage of development, privacy, dignity, physical ability / needs or their behaviour. The information regarding a young person's intimate care provision is described in either their pen portrait, behaviour support plan and / or moving & handling risk assessment.

Where pupils can express a preference for the gender of staff that will assist them or there is a reason of cultural observance within their intimate care, regime the supervising staff will try accommodating their wishes, as far as possible.

Where required, we will endeavour for 2 staff members to assist in intimate care activity. It is our aim that staff members participate with the intimate care of students of their own gender; we prefer male staff not to support the intimate care of girls, particularly teenage girls (who are on their menstrual cycle). Where this is not possible, 2 members of staff (one of each gender) will provide intimate care support, with the lead role / key responsibilities taken by the staff member who is of the same gender as the student, with the other staff member (of the opposite gender) assisting.

Safeguarding – All staff are trained in Safeguarding and follow the guidance provided.

If a member of staff is concerned about any physical or emotional changes, such as marks, bruises, soreness, distress etc they will inform the Designated Safeguarding Lead (DSL) immediately. The Safeguarding Policy will then be implemented.

If a child makes an allegation against a member of staff, the procedure set out in the Safeguarding Policy will be followed.

Dealing with body fluids – All bodily fluids will be cleaned up immediately and disposed of safely. When dealing with body fluid, 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 maintain high standards of personal hygiene, and will take all practicable steps to prevent and control the spread of infection.