

# INTIMATE CARE AND TOILETING POLICY

Approved by:	Governing Body
Policy Holder:	Headteacher
Date Approved	01.09.2025
Next review due by:	01.09.2026

Serenity Schools Group are committed to safeguarding and promoting the welfare of children and young people. We are committed to ensuring that all staff responsible for intimate care of children and young people will undertake their duties in a professional manner at all times.

- o Intimate care is defined as any care which involves washing, touching or carrying out an invasive procedure that most children and young people carry out for themselves, but which some are unable to do.
- o Intimate care tasks are associated with bodily functions, body products and personal hygiene that demand direct or indirect contact with, or exposure of the genitals. Examples include support with dressing and undressing (underwear), changing incontinence pads and nappies, helping someone use the toilet or washing intimate parts of the body. Disabled pupils may be unable to meet their own care needs for a variety of reasons and will require regular support.
- The Governing Body recognises its duties and responsibilities in relation to the Disability Discrimination Act which requires that any child with an impairment that affects his/her ability to carry out normal day-to-day activities must not be discriminated against.
- We recognise that there is a need for children and young people to be treated with respect when intimate care is given.
- o No child shall be attended to in a way that causes distress, embarrassment or pain.
- o Staff will work in close partnership with parents and carers to share information and provide continuity of care.

It is generally expected that most children will be toilet trained and out of nappies before they begin at school. However, it is inevitable that from time to time some children will have accidents and need to be attended to. In addition to this an increasing number of children and young people with disabilities and medical who require adult assistance for their personal and intimate care needs.

In order to help the children to become aware of their bodily needs and respond to them in time, those who wish to go to the toilet are always allowed to go, although they are encouraged as they progress through the school to use the toilet during break times.

School staff working in the primary phase have access to their own bathroom areas with a toilet and hand basin with access to warm water. There is also a stock of baby wipes, plastic

bags and disposable protective gloves available for staff to use, which they must do. Parents of key stage one - primary aged children, are expected to continue to provide a complete set of spare clothes and 'baby-wipes' if they know that their child needs it. The school also keeps a stock of spare clothes in various sizes.

If a child wets him/herself during school time, two members of staff (teacher and Progress Partner (PP) will help the child:

- o To remove their wet clothes
- o Clean and dry skin (this usually includes bottom, genitalia, legs, feet)
- o Dress in the child's own clothes or those provided by the school
- o Double wrap wet clothes in plastic bags and give to parents to take home.

If a child soils him/herself during school time, two members of staff (teacher and PP) will help the child:

- To remove their soiled clothes
- o Clean skin (this usually includes bottom, genitalia, legs, feet)
- o Dress in the child's own clothes or those provided by the school
- o Double wrap soiled clothes in plastic bags and give to parents to take home.

Parents should be informed at the end of the day. Our intention is that the child will never be left in soiled clothing.

At all times the members of staff will pay attention to the level of distress and comfort of the child. If the child is ill, the member of staff will telephone the parent/carer. In the event a child is reluctant or refuses to be changed, the parent/carer will be contacted immediately.

It is intended that the child will not experience any negative disciplining, but only positive encouragement and praise for his/her endeavours to master this necessary skill. It is always our intention to avoid drawing attention to such events and positively to encourage the child in his/her efforts to gain these skills.

#### Our approach to best practice for intimate care needs, over and above accidents:

- o The management of all children with intimate care needs will be carefully planned.
- Where specialist equipment and facilities are recommended following assessment by a Physiotherapist and/or Occupational Therapist, every effort will be made to provide these appropriate facilities or equipment in a timely fashion where possible.
- $\circ$  There is careful communication with any pupil who requires intimate care in line

with their preferred means of communication to discuss needs and preferences.

- Staff will be supported to adapt their practice in relation to the needs of individual children (KS2: taking into account developmental changes such as the
- onset of puberty and menstruation.)
- Pupils will be supported to achieve the highest level of independence possible, according to their individual condition and abilities.
- o Individual care plans may be drawn up for any pupil requiring regular intimate care and will be considered on an individual basis.
- o Careful consideration will be given to individual situations to determine how many adults should be present during intimate care procedures. Where possible a pupil will be cared for by two adults unless there is a sound reason for having less adults present. In such a case, the reasons will be documented.
- o Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the care plan.
- o The needs and wishes of children and parents will be taken into account wherever possible, within the constraints of staffing and equal opportunities legislation
- o Where a care plan is not in place and a child has needed help with intimate care (in the case of a toilet 'accident') then parents/carers will be informed the same day.
- o Where care has been given staff must ensure that this is logged on the intimate care log. This should be kept in a confidential folder.
- This information should be treated as confidential and communicated in person, via telephone or by sealed letter

#### Child Protection and Safeguarding

The Governors and staff of Serenity Schools Group, recognise that disabled children are particularly vulnerable to all forms of abuse.

Child Protection and Multi-Agency Child Protection procedures will be adhered to at all times.

If a member of staff has any concerns about physical changes in a child's presentation (unexplained marks, bruises or soreness for example) s/he will immediately report concerns to the Designated Person for Child Protection.

If a child becomes distressed or unhappy about being cared for a particular member of staff, the matter will be investigated at an appropriate level and outcomes recorded.

Parents/carers will be contacted at the earliest opportunity as part of the process of reaching a resolution. Further advice will be taken from partner agencies.

If a child makes an allegation about a member of staff this will be investigated in accordance with agreed procedures.

#### **REFERENCES**

Please refer to the names policies or documents for further information:

- Safeguarding and Child Protection Policy
- o Keeping Children Safe in Education
- Working Together to Safeguard children

## Appendix 1

### INTIMATE CARE LOG

	Date and signature of	Any incident needing adult
Name of Child	adult undertaking care	assistance should be described
		here. E.g. soiling, wetting, etc.