



# St. Mark's C.E. Primary School

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## Intimate Care Policy

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## Intimate Care and Toileting Policy

### Remit

Some children within school require assistance with intimate care tasks, especially toileting. Other children may also experience difficulties with toileting for a variety of reasons.

All of the children/young people we work with have the right to be safe, to be treated with courtesy, dignity, and respect, and to be able to access all aspects of the education curriculum.

This policy sets out clear principles and guidance on supporting intimate care needs with specific reference to toileting.

### Background

The DDA (The Disability Discrimination Act (DDA 2001 amended 2005) provides protection for anyone who has a physical, sensory or mental impairment that has an adverse effect on his/her ability to carry out normal day-to-day activities. The effect must be substantial and long-term.

Anyone with a named condition that affects aspects of personal development must not be discriminated against. Delayed continence is not necessarily linked with learning difficulties, but children with global developmental delay which may not have been identified by the time they enter nursery or school are likely to be late coming out of nappies. It follows that it is unacceptable to refuse admission to children and young people who are delayed in achieving continence.

St. Mark's, therefore, has an obligation to meet the toileting needs of children in the same way as they would meet the individual needs of those with delayed language, or any other kind of delayed development. Children should not be excluded from normal pre-school activities solely because of incontinence, neither should they be sent home to change, or be required to wait for their parents or carers to attend to them at school.

All such issues have to be dealt with on an individual basis, and settings are expected to make reasonable adjustments to meet the needs of each child or young person.

### AIMS

The aims of this policy are:

- To safeguard the rights and promote the welfare of children and young people.
- To provide guidance and reassurance to staff whose deal with intimate care.
- To assure parents and carers that staff are knowledgeable about personal care and that their individual concerns are taken into account.
- To remove barriers to learning and participation, protect from discrimination, and ensure inclusion for all children.

### DEFINITION OF INTIMATE CARE

'Intimate Care' can be defined as care tasks of an intimate nature, associated with bodily functions, bodily products and personal hygiene, which demand direct or indirect contact with, or

exposure of, the sexual parts of the body. Help may also be required with changing colostomy or ileostomy bags, managing catheters, stomas or other appliances.

Intimate care tasks specifically identified as relevant include:

- Dressing and undressing (underwear)
- Helping someone use the toilet
- Changing continence pads (faeces and urine)
- Cleaning intimate parts of the body
- Inserting suppositories (with training)

#### DEFINITION OF PERSONAL CARE

Personal care tasks include:

- Skin care/applying external medication
- Feeding
- Administering oral medication
- Dressing and undressing (clothing)
- Washing non-intimate body parts
- Prompting to go to the toilet

Children and young people may require help with eating, drinking, washing, dressing and toileting. This guidance is not prescriptive but is based on the good practice and practical experience of those dealing with such children and young people.

#### BASIC PRINCIPLES

Children and young people's intimate care needs cannot be seen in isolation or separated from other aspects of their lives. Encouraging them to participate in their own intimate or personal care should therefore be part of a general approach towards facilitating participation in daily life.

Intimate care can also take substantial amounts of time but should be an enjoyable experience for the child and for their parents/carer(s). It is essential that every child is treated as an individual and that care is given as gently and as sensitively as possible. The child should be encouraged to express choice and to have a positive image of his/her body.

Staff should bear in mind the following principles:

- Children have a right to feel safe and secure.
- Children have a right to an education and schools have a duty to identify and remove barriers to learning and participation for pupils of all abilities and needs
- Children/young people should be respected and valued as individuals.
- Children/young people have a right to privacy, dignity and a professional approach from staff when meeting their needs.
- Children/young people have the right to information and support to enable them to make appropriate choices.
- Children/young people have the right to be accepted for who they are, without regard to age, gender, ability, race, culture or beliefs.
- Children/young people have the right to express their views and have them heard.

#### WORKING WITH PARENTS/CARERS

Establishing effective working relationships with parents/carers is a key task for all schools and is particularly necessary for children/young people with special care needs or disabilities.

Parents/carers should be encouraged and empowered to work with professionals to ensure their child/young person's needs are properly identified, understood and met. Although they should be

made welcome, and given every opportunity to explain their child/young person's particular needs, they should not be made to feel responsible for their child's care in school .

### GOOD PRACTICE GUIDANCE

Staff receive training in good working practices which comply with Health and Safety regulations such as dealing with bodily fluids, wearing protective clothing, Manual Handling, Child Protection, HIV and Infection, Whistle Blowing, Risk Assessment.

St. Mark's expectations for intimate care:

- Where a routine procedure needs to be established, there should be an agreed Intimate/Personal Care Plan (Appendix 1) involving discussion with school, parents or carers and the relevant health personnel. All parties should sign the plan. The plan must be reviewed on a regular basis. A copy is kept in the Care Plan file in the office.
- Staffing levels need to be carefully considered. There is a balance to be struck between maintaining privacy and dignity for children/young people alongside protection for them and staff. Some procedures may require two members of staff for health and safety reasons e.g. manual handling. This should be clearly stated in the care plan. As far as possible, personal care procedures should be carried out by one person.
- The person (people) carrying out the intimate care must be school staff, not coaches etc
- If a situation occurs which causes personal care staff embarrassment or concern, a second member of staff should be called if necessary, and the incident reported and recorded.
- When staff are concerned about a child actions or comments whilst carrying out the personal care procedure, this should be recorded and discussed with a line manager immediately.
- Parents (adult collecting) to be informed at the end of the day following an intimate care action – they should sign the Intimate Care exercise book to state they have been informed (copy in office; YN and YR have their own in the classrooms). This will not be necessary if it is a regular occurrence and an Intimate/Personal Care Plan has been completed.

Other practical considerations:

- There should be sufficient space, heating and ventilation to ensure safety and comfort for staff and child/young person.
- Facilities with hot and cold running water. Anti-bacterial hand wash should be available.
- Items of protective clothing, such as disposable gloves and aprons should be provided. No re-use of disposable gloves.
- Special bins should be provided for the disposal of wet and soiled nappies/pads.

Revised January 2016

<p>Toileting Plan <i>Record of Discussion with Parent/Carers</i></p>	
Child's Name:	DOB:

Working Towards Independence: e.g. taking child to toilet at timed intervals, using sign or symbol, any rewards used.	
Arrangements for Nappy/pad Changing: e.g. who, where, arrangements for privacy	
Level of Assistance e.g. undressing, dressing, hand washing, talking/signing to child/young person	
Infection Control: e.g. wearing disposable gloves, nappy disposal	
Sharing Information: e.g. if the child has a nappy rash or any marks, any family customs/cultural practice	
Resources Needed: e.g. special seat, nappies/pull-ups, creams, disposable sacks, change of clothes, gloves	

Parent signature .....

Member of staff signature .....

Date .....