



BENTLEY CE PRIMARY SCHOOL
INTIMATE CARE POLICY
PART OF THE HEALTH & SAFETY POLICY

Date of review	April 2021
Period of review	3 Years
First written	2018 Katy Pinchess
Review lead	Paul Harrison
Governor Committee	FGB

Background

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.

Children with continence problems are a very diverse group. However, broadly speaking, children with continence problems can be divided into the following groups:

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| 1. Late developers | The child may be developing normally but at a slower pace. |
| 2. Children with some developmental delay | Many more of these children are now in early years and mainstream settings. |
| 3. Children with physical disabilities | e.g. cerebral palsy, spina bifida, obvious physical impairment. Long-term continence development / management plans are likely to be needed. |
| 4. Children with behavioural difficulties. | Delayed toilet training may be part of more General emotional / behavioural difficulties |

Principles

Every effort should be made to encourage independence before a child arrives at school. Whilst some children achieve independence relatively easily, others may never achieve full independence. We will endeavour to support the needs of each child to the best of our ability. We would always try to plan for the development of independence skills, particularly for children who are highly dependent upon adult support for personal care.

We believe that children should be treated with dignity and respect by all school staff, who are aware of the importance of helping them to develop as far as possible towards independence in personal care. However, as far as is reasonably practicable, we aim to ensure that staff are able to handle children's care needs safely and with dignity.

Each child's case should be considered individually.

Once we have been made aware that a new child has a continence problem we will arrange a meeting to discuss plans and to create an initial Care Plan. The SENCo will take the lead in setting up this meeting. We will invite;

- School staff, including class teacher/LSA and SENCo
- Parents/carers
- Any colleagues from the Health Authority
- Physical Disability Inclusion Support Officer, from the Specialist Teacher Advisory Service.

In writing the Care Plan with parents the child should also be consulted, if appropriate, as well as the staff involved in carrying out the care. The plan will include information about when and where the child will be cared for, and the practices to be used if necessary. It will specify the people who will be carrying out the care duties. Parents will be informed if there is a change of staff. It will include reference to a care diary if we decide that this is needed. The continence care plan should be signed by all involved in drawing it up, and must include parental consent and a review date. See pro forma is included in Appendix 1.

In line with current Hampshire County Council expectations it would be usual for there to be one adult involved to support the child. We follow Safeguarding Policy expectations in ensuring that all staff are DBS checked and that our school operates in a manner where safeguarding is at the heart of what we do. Any moving and handling that is necessary should be carried out in accordance with LA guidelines.

Through this initial meeting with parents we will ensure that staff have appropriate information and training, including regular review of procedure and practice. By this we mean;

Training;

- Child Protection training
- Training and child specific information from parents/healthcare staff/PD Advisory Teacher

Policies;

- Safeguarding Policy
- Intimate Care Policy (part of Health and Safety Policy) including current 'Guidance on Toileting Needs in Schools and Early Years Settings' from Hampshire County Council

Systems of care should be implemented that;

- Preserve the dignity and independence of the child or young person and avoid the risk of ridicule or bullying from peers or staff;
- Carry out the continence treatment or management plan as agreed in the assessment;
- Enable good pathways of communication from child or young person to the school-based carer, the multi-disciplinary team and the parent or carer;
- Provide adequately trained school-based care staff.

The school advises the following as reasonable steps to safeguard children and to maintain the child's dignity whilst acknowledging professionals' fear about allegations of abuse:

- Inform a colleague when a child needs to be taken to the toilet.
- Make a record of each occasion, including time and duration.
- Consideration should be given to providing intimate care to children of the opposite sex. In considering this issue, attention should be paid to the age of the child, his/her wishes and feelings, any expressed parental directions along with the wishes and feelings of the member of staff concerned

Practice

Intimate care may be required by any pupil at the school at any time and would be given appropriately in accordance with the HCC guidelines. Intimate care but will certainly be required by a child with an ongoing toileting issue. We do therefore require written permission to give this ongoing intimate care from the parent/carer using appendix 1. Children's Social Care must be informed for children who are on the child protection register.

Staff will use appropriate protective equipment e.g. gloves.

Parents will supply the necessary change of clothing.

Children should be changed by one adult to protect the child's dignity and encourage them to become independent. Another adult will be made aware before the child is helped to change.

The occasion must be recorded on the Proforma in appendix 2 and the parent must be informed as part of the ongoing reviews (e.g. weekly or daily feedback) or as a one off on that day if required outside of a Care Plan.

Appendix 1.

Name of child:

Date:

I give permission for Bentley CE Primary School staff to clean my child in the event of a toileting accident. The person who will be responsible for this will be:

Name of parent:

Signature:

Appendix 2.

Bentley CE Primary School

Record of Intimate Care for:

Member of staff responsible:

Care Plan agreed on:

Date	Staff member	Time and duration	Comment (if any)	Staff signature/initials