



Bridgeview Special School

Intimate Care & Toileting Policy



1	Summary	Accessibility Plan			
2	Responsible person	Robert Abrahamsen & Maria Hope			
3	Accountable SLT member	Robert Abrahamsen & Maria Hope			
4	Applies to	<input checked="" type="checkbox"/> All staff <input type="checkbox"/> Support staff <input type="checkbox"/> Teaching staff			
5	Who has overseen development of this policy	SLT			
6	Who has been consulted and recommended policy for approval	SLT			
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12	Date of implementation (when shared)				
13	Consulted with recognised trade unions	<input type="checkbox"/> Y <input type="checkbox"/> N			

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Introduction

The Governing Body is committed to safeguarding and promoting the welfare of children and young people and expects all staff, volunteers and visitors to share this commitment. Intimate care is any care which involves washing, touching or carrying out an invasive procedure (such as cleaning up a child after they have soiled themselves) to intimate personal areas. In most cases such care will involve cleaning for hygiene purposes, as part of a staff member’s duty of care. In the case of a specific procedure only a person suitably trained and assessed as competent should undertake the procedure. The issue of intimate care is a sensitive one and requires staff to be respectful of the child’s needs. The child’s dignity should always be preserved with a high level of privacy, choice and control. There will always be a high awareness of child protection issues. Staff behaviour must be open to scrutiny and staff must work in partnership with parents/carers to provide continuity of care to children/young people wherever possible. The following policy is a model based on best practice.

Aims of this Policy

This policy sets out the procedures for dealing with toileting and personal/intimate care tasks with the utmost professionalism, dignity and respect for the child and the maintenance of highest health and safety standards possible. The aim being to safeguard children, parents, staff and the school by providing a consistent approach within a framework which recognises the rights and responsibilities of everyone involved.

Approach to Best Practice

Venn 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. Any child with intimate care needs 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 they can. This may mean, for example giving the child responsibility for washing and dressing themselves. Individual intimate care plans will be drawn up for particular children as appropriate (see appendix 1) 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 being 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. Intimate care arrangements will be discussed with parents 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.

The Protection of Children

Venn Academy Safeguarding Procedure, 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 staff member has any concerns about a child's physical changes (bruises, marks etc.) they will immediately report concerns as per school procedures.

If a child becomes distressed or unhappy regarding being cared for by a particular member of staff, the matter will be looked into, parents will be consulted and outcomes recorded. Staffing schedules will need to be altered until the issue is resolved as the child's needs remain paramount. If a child makes allegations against a member of staff, necessary procedures will be followed. (See Safeguarding Policy for further information).

All adults carrying out intimate care or toileting tasks will be employees of the school and enhanced DBS checks will be in place to ensure the safety of the children. Students on work placement, voluntary staff or other parents working at the school will not be permitted to attend to toileting or intimate care tasks.

Children Wearing Pads

Any child wearing pads will have an intimate care plan which must be signed by the parent/carer. This plan will outline who is responsible for changing the child, and where and when this will be carried out. This agreement allows school and parents to be aware of all issues surrounding the task from the outset.

Health & Safety Guidance

Staff should always wear an apron and disposable gloves when dealing with a child who is soiled or when changing a nappy. Any soiled waste should be placed in a polythene waste disposal bag and sealed. The bag should then be placed in a bin, (with a liner) specifically designed for such waste. This bin should be collected on a weekly basis as part of the usual refuse. It is not classed as clinical waste.

In reference to any requests from the parents for use of medical ointments/creams, these should be prescribed by the GP and clearly labelled with the child's name. These should not be shared between other children and should be stored in a locked storage facility in line with the Medicines Policy.

Special Needs

Children with special needs have the same rights to privacy and safety when receiving intimate care. Additional vulnerabilities (any physical disability or learning difficulty) must be considered when drawing up care plans for individual children. Regardless of age and ability, the views and emotional responses of children with special needs should be actively sought when drawing up or reviewing a care plan.

Physical Contact

All staff engaged in the care and education of children and young people need to exercise caution in the use of physical contact. Staff must be aware that even well-intentioned contact might be misconstrued by the child or an observer. Staff must always be prepared to justify actions and accept that all physical contact is open to scrutiny. The expectation is that when staff make physical contact with children it will be:

- For the least amount of time necessary (limited touch)
- Appropriate, given their age, stage of development and background
- In response to the pupils' needs at the time

Arrangements must be understood and agreed by all concerned, justified in terms of the child's needs and consistently applied and open to scrutiny. Where possible, consultation with colleagues should take place where any deviation from arrangements is anticipated. Any deviation from the agreed plan must be documented and reported.

Appendix 1: Intimate Care and Toileting Parental Consent Form

Name of Child:	
Date of Birth:	
Class / Teacher Name:	
Care required and how often during the day	
Member(s) of staff who will carry out the tasks – all staff need to be fully aware of toileting/intimate care plan.	
Name:	
Signature:	
Where will the tasks be carried out and what equipment/resources will be required to safely carry out the procedures:	
Infection Control and Disposal Procedures in place:	
Actions that will be taken if any concerns arise:	
Parent's responsibility to provide:	

Communication Arrangements:

Other Professionals in involved in care/advisory role: (School Nurse, Health Visitor, etc)

Additional Information:

I/We have read the Intimate Care/Toileting Plan provided by the school. I/We give permission for the named member(s) of staff to attend to the care needs of my/our child and are in agreement with the procedures proposed

Name of Parent/Carer:

Signature:

Head Teacher:

Signature:

Date:

