

## **Intimate Care Policy 2025/2026**

### **Introduction**

At St Augustine's Catholic Primary School and Nursery, we recognise that all children have different rates of development and differing needs during their time at school. Most children achieve continence before starting full-time school; however, there are many children in mainstream education who are not fully independent.

Some children 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. We are committed to ensuring that all pupils are able to access the whole curriculum and are able to be included in all aspects of school life. This includes supporting children with changes of clothing and attending to the continence needs of our pupils where necessary.

### **Definition of Intimate Care**

An intimate care task is any task that involves dressing and undressing, washing a child (including intimate parts), helping them to use the toilet, changing a nappy, pull up or any procedure that requires direct or indirect contact with an intimate, personal area.

### **Aims**

All children have the right to be safe, to be treated with courtesy, dignity and respect and to be able to access all aspects of the educational curriculum.

At St Augustine's, we will work:

- To ensure that pupils with continence difficulties are not discriminated against in line with the Equalities Act 2010
- To provide help and support to pupils in becoming fully independent in personal hygiene
- To treat continence issues sensitively in order to maintain the self-esteem of the child
- Support parents in delivering a suitable care plan where necessary

- To ensure that staff dealing with continence issues work within guidelines that protect themselves and the pupils involved (following Health and Safety (H&S) Policy and guidelines and Safeguarding Children Policy)

## **Provision**

- We will keep toilet facilities available to children throughout the day, as we recognise not all children will conform to timetabled use.
- We have toileting facilities that are suitable for all. Each year group has an accessible toilet for children with disabilities.
- We will ensure toilet areas are well maintained with adequate lighting, warm and cold water, soap, hand drying facilities and tissue in dispensers at an adequate height.
- There are sanitary disposal units in cubicles in junior toilets and these are serviced on a regular basis.
- We provide a variety of sanitary wear; these are stored in the accessible toilet by the school office.
- There is a sanitised nappy bin available for the disposal of nappies in the accessible toilet facility – infant building and Annexe building.
- We maintain an effective toilet cleaning, supervision regime to ensure high standards of provision and cleanliness throughout the day.
- Children are encouraged to be as independent as possible, staff will only provide help and support when necessary.
- The accessible toilet in the Infant building has facilities that allow for nappy changes if necessary.
- This room can also be used to allow children to change/ clean themselves, with support if needed.

## **Arrangements**

For children who are not able to use the toilet themselves, a toilet plan will be put into place.

This will be discussed with parents/carers and signed to consent. (Please see appendix 1)

Our best practice approach for those that need support includes:

- The member of staff giving intimate care explains fully what they are doing and

their reason for doing it. Staff will encourage the child to do as much for themselves as they can. They will use lots of encouragement and praise for achievements.

- Familiar, trained and DBS cleared staff will be named on individual toilet plans.
- Careful consideration is given on an individual basis as to how many adults need to be present and advice is taken from specialist agencies (physiotherapists/ occupational therapists) in order to support those with additional needs or disabilities.
- To preserve the child's dignity and privacy, one adult will normally support them.
- Staff will be supported to adapt their practice in relation to the needs of the individual and taking into account developmental changes like onset of puberty or menstruation.
- The child will be supported to achieve the highest level of autonomy possible, given their age and ability.
- Toileting/ Health Care plans will be written with parents, health professionals and SENDCo for children as appropriate to their circumstances and needs.
- The accessible toilet will be a central location for intimate care equipment to be stored. Spare clothing and underwear may be stored in the child's classroom if more suitable.
- To minimise distress to the child, all personal care equipment needed should be prepared before the care begins.
- Upon incidents of incontinence, the parent/ carer will be informed. It may then become necessary for a toileting plan to be put into place or a referral made to the school nurse team.
- The needs and wishes of the child and parents will be taken into account wherever possible, within the constraints of staffing and equal opportunities legislation.
- If a child has soiled due to an illness such as sickness and diarrhoea, they need to remain absent from school until fully recovered.

## **Care Plans**

Where a child has a particular medical need e.g. wearing nappies or pull-ups regularly, or has continence difficulties which are more frequent than occasional 'accidents', staff will work with parents/carers (and health visitors/school nurse, if appropriate) to set out a care plan to ensure that the child is able to attend daily.

The written care plan will include:

- Who will change the child including back-up arrangements in case of staff absence or turnover
- What resources and equipment will be used (cleansing agents used or cream to be applied)
- The equipment and supplies to be provided to school

More complex needs may include:

- Training requirements for staff
- Arrangements for school trips and outings
- How the child is best supported
- Other agencies involved and parental agreement to access support ●

Frequency of changing

- Care plan review arrangements

### **Health and Safety Procedures**

When dealing with personal care and continence issues, staff will follow health and safety procedures to protect both the child and themselves

- Staff to wear disposable gloves and aprons while dealing with the incident
- Soiled continence product used to be wrapped, or placed in a hygienic disposal unit

(identified bin in the accessible toilet or school office)

- Changing area to be cleaned after use
- Hot water and liquid soap available to wash hands as soon as the task is completed
- Paper towels available for drying hands.

### **Child Protection**

The normal process of changing continence or wet/soiled clothes should not raise child protection concerns, and there are no regulations that indicate that a second member of staff must be available to supervise the changing process to ensure that abuse does not take place.

Few schools will have the staffing resources to provide two members of staff for changing and DBS checks are carried out to ensure the safety of children with staff employed in our school.

If there is, known risk of false allegation by a child then a single practitioner will not undertake changing. A student on placement will not change a child unsupervised. Wherever possible, the same member of staff will change named children. This reduces the risk to the child and promotes their dignity. The care plan will outline back up or contingency measures in the event that the named member of staff is not available

Our school Safeguarding Policy will be followed. If any staff member has concerns about physical changes to a child's presentation e.g. marks, bruises, soreness or distress they should immediately raise the concern with the designated safeguarding lead or deputy safeguarding officers.

If a child becomes unhappy or distressed about being cared for by a particular member of staff, the matter will be looked into by the Headteacher or Assistant Headteacher and the outcome recorded. Parents/ carers will be contacted at the earliest opportunity as part of the process to reach a resolution. If necessary, the DSL will seek advice from other agencies.

### **Monitoring and Review**

The SENDCO is responsible for monitoring that agreed procedures are being followed and are meeting the needs of children and families.

Any concerns that staff have about child protection issues will be reported to the Designated Safeguarding Lead (DSL) and subsequently the Headteacher for further referral if appropriate.

This policy runs alongside other school policies, particularly Safeguarding Children, SEND information report and Health and Safety.

This policy will be reviewed every 3 years or sooner if necessary.

## Appendix 1 – St Augustine’s Catholic Primary School and Nursery Toilet Plan

Children will be encouraged to do whatever they can to look after their own needs; staff will only intervene when necessary.

I give permission for my child \_\_\_\_\_ to have their nappy / pull up / clothing changed at school.

I will provide (please tick)

- Nappies / pull ups
- Cream
- Change of clothes

I will ensure all items are labelled with my child’s name and a change of clothing will stay in their bag for when/if needed. Staff will inform me if my child’s toileting supplies are running low.

Signed: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Date: \_\_\_\_\_