

Bushfield Road Infant School



Intimate and Personal Care Policy

Updated Autumn 2024

Next review: Autumn 2025

The policy will be reviewed annually.

Mission Statement:

At Bushfield Infant School, we provide a positive, happy and safe learning environment where all children feel valued and secure. We are committed to providing a rich and exciting curriculum, which encourages all children to meet challenges with enthusiasm and inspires them to succeed. At the heart of our school is a strong commitment to raising children's self-esteem and self-confidence, which enables them to become confident life-long learners.

The purpose of this policy is to set out a clear framework within which all children and young people receive intimate and personal care they require in order to participate fully in Nursery.

Policy Statement:

In line with the Disability Discrimination Act (DDA 2001 amended 2005), Bushfield Road Nursery states that no child will be excluded from participating in our setting who may, for any reason, not yet be toilet trained and who may still be wearing nappies or equivalent whatever their age. An increasing number of children 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 have the right to be safe, to be treated with courtesy, dignity, and respect. We aim to work with parents towards toilet training at the appropriate age, unless there are medical or other developmental reasons why this may not be appropriate at the time. We see toilet training as a self-care skill that children have the opportunity to learn with the full support and non-judgemental concern of adults.

Definition of Intimate Care

There is a clear difference between personal and intimate assistance. '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.

The Intimate care tasks specifically identified as relevant include:

- Dressing and undressing;
- Helping someone use the toilet;
- Changing nappies;
- Showering;

Definition of Personal Care

Care generally carries more positive perceptions than intimate care. Although it may often involve touching another person, the nature of this touching is more socially acceptable, as it is less intimate and usually has the function of helping with personal presentation and hence is regarded as social functioning. These tasks do not invade conventional personal, private or social space to the same extent as intimate care and are certainly more valued as they can lead to positive social outcomes for people.

Those personal care tasks specifically identified as relevant here include:

- Skin care/applying external medication;
- Feeding;
- Administering oral medication;
- Hair care;
- Dressing and undressing;
- Washing non-intimate body parts;
- Prompting to go to the toilet.

Personal Care encompasses those areas of physical and medical care that most people carry out for themselves but which some are unable to do because of disability or medical need. Children may require help with eating, drinking, washing, dressing and toileting.

Principles of Intimate Care and Personal Care

The following are the fundamental principles of intimate and personal care upon which our policy guidelines are based:

- Every child has the right to be safe;
- Every child has the right to personal privacy;
- Every child has the right to be valued as an individual;
- Every child has the right to be treated with dignity and respect.

Our Policy

All children who require intimate and/or personal care are treated respectfully at all times; the child's welfare and dignity is of paramount importance.

Staff who provide intimate care are trained to do so (including Child Protection and Health and Safety training) and are fully aware of best practice.

Staff will be supported to adapt their practice in relation to the needs of individual children taking into account the developmental stage the child is at. There is careful communication with each child who needs support in line with their preferred means of communication. The child is aware of each procedure that is carried out and the reasons for it.

As a basic principle children 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 themselves as they can.

The Protection of Children

Safeguarding Procedures will be accessible to staff and adhered to. All staff involved in the provision of intimate and/or personal care will have all relevant checks completed before allowing them to be left alone with children (e.g. DBS) and will be subject to robust internal procedures such as reference checking and monitoring and regular updating of enhanced DBS checks.

Where appropriate, all children will be taught personal safety skills carefully matched to their level of development and understanding.

If a member of staff has any concerns about physical changes in a child's presentation, e.g. marks, bruises, soreness etc. s/he will immediately report concerns to the appropriate manager / designated person for child protection. Safeguarding procedures will then be followed and guidance provided to the member of staff.

If a child becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be looked into and outcomes recorded. Parents/carers will be contacted at the earliest opportunity as part of this process in order to reach a resolution.

If a child makes an allegation against a member of staff, all necessary procedures will be followed.

Guidelines for Good Practice

All children have the right to be safe and to be treated with dignity and respect. These guidelines are designed to safeguard children and staff. They apply to every member of staff involved with the intimate care of children.

Treating children and young people with dignity and respect

Young children and children with special educational needs can be especially vulnerable. Staff involved with their intimate care need to be particularly sensitive to their individual needs. Staff also need to be aware that in exceptional circumstances some adults may use intimate care as an opportunity to

abuse children. Adhering to the following guidelines of good practice should safeguard children and staff.

1. Involve the child in the intimate care

Try to encourage a child's independence as far as possible in his or her intimate care. Where a situation renders a child fully dependent, talk about what is going to be done and give choices where possible. Check your practice by asking the child or parent about any preferences while carrying out the intimate care.

2. Treat every child with dignity and respect and ensure privacy appropriate to the child's age and situation.

Staff can administer Intimate Care alone however settings need to be aware of the potential safeguarding issues for the child and member of staff. Care should be taken to ensure adequate supervision primarily to safeguard the child but also to protect the staff member from potential risk.

3. Be aware of your own limitations

Only carry out activities you understand and feel competent with. If in doubt, ASK. Some procedures must only be carried out by members of staff who have been formally trained and assessed.

4. Promote positive self-esteem and body image.

Confident, self-assured children who feel their body belongs to them are less vulnerable to Sexual Abuse. The approach you take to intimate care can convey lots of messages to a child about their body worth. Your attitude to a child's intimate care is important. Keeping in mind the child's age, routine care can be both efficient and relaxed.

5. If you have any concerns you must report them.

If you observe any unusual markings, discolouration or swelling, report it immediately to the designated practitioner for child protection.

If a child is accidentally hurt during the intimate care or misunderstands or misinterprets something, reassure the child, ensure their safety and report the incident immediately to the designated Practitioner. Report and record any unusual emotional or behavioural response by the child.

6. Helping through communication

There is careful communication with each child who needs help with intimate care in line with their preferred means of communication to discuss the child's needs and preferences. The child is aware of each procedure that is carried out and the reasons for it.

7. Support to achieve the highest level of autonomy and independence

As a basic principle children 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 themselves as they can.

Infection prevention control

Infection prevention and control is concerned with the prevention of avoidable risks of infection and the control and management of all unavoidable risks of infection to those administering and receiving intimate and personal care. We will manage infection risks related to the setting, equipment, staff working practices and clinical practices arising from the intimate and personal care of children.

Please refer to the Infection Prevention and Control Policy and Procedures for guidance on implementation in your setting.

Forward Planning with parents/carers and children

Establishing effective working relationships with parents/carers is a key task for all settings and is particularly necessary for children with special care needs or disabilities. Parents/carers should be encouraged and empowered to work with professionals to ensure their child's needs are properly

identified, understood and met. Staff have a duty to remove barriers to learning and participation for pupils and students of all abilities and needs. It is also important that the procedure for dealing with concerns arising from personal care processes is clearly stated and understood by parents/carers and all those involved.

If a child has a disability or medical need that may affect their personal care routine then a Health Care Plan will be drawn up in agreement with Parents or Carers. Parents will be asked when their child first starts at Nursery about their nappy changing procedure at home and if any special words are used. Parents will be asked at Home visit whether they feel their child is ready for toilet training and if they are happy for Nursery staff to begin that process when the child is settled into Nursery. Any significant observations made during a nappy changing procedure will be notified to the parents at the end of the session. e.g. badly soiled nappy, strong smelling urine etc.

Toilet Training:

At Bushfield Nursery we will encourage all our children to achieve continence when they exhibit signs that they are ready. We aim to work in partnership with parents and carers to achieve this as quickly and easily as possible.

In addition, key persons ensure that nappy changing is a relaxed time and is used to promote independence in young children. Staff will use the nappy changing time to talk to the child about what they are doing and develop the child's vocabulary. They will also try to encourage them to become independent in dressing and undressing themselves and washing and drying their hands.

Working with other agencies

Children with special care needs or disabilities will be known to a range of other agencies. It is important that positive links are made with all those involved in the care or welfare of individual children. This will enable the setting based plans to take account of the knowledge, skills and expertise of other professionals and will ensure the child's well-being and development remains the focus of concern. Achieving continence is one of hundreds of developmental milestones for all children usually reached within the context of learning in the home before the child transfers to learning in a setting. In some cases this one developmental area can assume significance beyond all others. Parents and carers are sometimes made to feel guilty that this aspect of learning has not been achieved, whereas other delayed learning is not so stigmatising. Settings have a responsibility to teach toilet training and other personal care skills, as an essential PSHE basis in order to be able to access the rest of the curriculum.

Resources and training

Each child's right to privacy must be respected. Where possible the child's key-person is responsible for undertaking the care of an individual child. When this is not possible a staff member who is known to the child will take on that responsibility. The staff member who is involved will always ask the child for permission to assist them.

Space for privacy

It is important that children are changed in a reassuring and caring way by their key person or another familiar member of staff who they have a close relationship with. We ensure that the child understands our intention to change their nappy and gives us consent, if appropriate to their development. This is so they understand that it is not appropriate for just anyone to take them off and undress them.

Staff should always change children in the designated changing area, using the change table as appropriate, which allows for privacy. Staff should inform another member of staff of their intent to change a child's nappy before leaving the Nursery. Staff are encouraged to ask for help or support when they feel it is needed.

Nappy changing procedures will be carried out by a member of the Nursery Staff and where possible that will be the child's Key Worker or supporting TA.

- Staff will be trained in good working practices which comply with health and safety regulations.
- Staff will inform another member of staff discreetly that they are taking a child out to change their nappy.
- If a situation occurs that causes staff concern then a second member of staff should be called if necessary and the incident reported to the Nursery Teacher and recorded using CPOMs.
- If staff are concerned about a child's actions or comments whilst nappy changing or they notice any unusual marks then this should be discussed with the Nursery Teacher and the School's Child Protection Leader immediately. Details of the incident should be recorded on CPOMs.
- Students and parent helpers will not change nappies.
- Supply staff will not change nappies unless employed as a key worker on a long term basis.

Nappy Changing:

- Items needed for nappy changing will be stored in the change room on the shelves in the changing station in a box labelled with the child's name. Parents should provide wipes, nappies and a change of clothes for accidents.
- Nappy changes will be recorded on a record sheet including timings and by whom.
- Nappies should be changed at designated times of the day unless the nappy has been soiled when it should be changed immediately. These times are between 10.30am and 11am in the morning and 2.30pm and 3pm in the afternoon.
- All children in nappies or pull ups will be checked at these times. If the child's nappy is dry then the nappy does not need to be changed at this time. The member of staff checking should make a note on the record sheet that it has been checked. The child should be checked again later on in the day and changed as appropriate.
- Children that wear pull ups will be encouraged to use the toilet or potty at snack and lunch time as appropriate.
- All staff will be aware of which children are in nappies or pull ups and those that are currently being toilet trained. Staff at lunchtime will be informed of who has or hasn't been changed in the morning.

Nappy Changing Procedure:

- Approach the child and explain that it is time to change their nappy. If they are engrossed in an activity then give them a warning "We are going to change your nappy in 2 minutes"
- Do not approach the child from behind. Do not pick them up and take them for a nappy change. Take the child's hand and lead them to the change room, letting another adult know where you are going.
- Wash your hands and put on disposable gloves. A plastic apron can be worn if needed. A new set of gloves should be used for each nappy change. A large piece of tissue should be used to cover the change table which the child lays on.
- Pull out the steps on the change table and support the child to climb the steps using the hand rail as appropriate.
- Sit the child on the change table and ask them to help you remove their shoes and any clothing so that the nappy can be accessed. Then lay the child down on the change table, over the large piece of tissue.
- Remove the child's nappy and place it in a nappy bag. Do not make any negative comments about the content of the nappy.
- Use wipes to clean the child, wiping from front to back, and put them in the nappy bag too, tying the bag up.
- Put on a clean nappy.

- The shower can be used to clean children if they need it but another adult should be present to help with this procedure.
- If a child's clothes are soiled then they should be put in a nappy bag to be sent home.
- Encourage the child to help you dress them and then wash and dry their hands with soap.
- Take the child back into Nursery.
- Return to the changing area. Clean the changing mat and the hand rail with disinfectant. Replace the large piece of tissue with a clean piece from the roll. Put the used nappy in the bin outside nursery. Remove your gloves and apron if one has been worn. Wash and dry your hands.
- Staff should record on the record sheet the time that the child had been changed, whether they were wet or soiled and their initials.
- Children can be changed standing up on the floor of the change room if this is more appropriate for them.

Toilet Training Procedure:

- At Bushfield Nursery when we feel a child is ready for toilet training we will discuss this with parents and carers.
- Parents will be encouraged to provide pull ups and pants as well as changes of clothes to help with the training time.
- We will encourage the child to sit on the potty or toilet regularly during the day.
- Children will be encouraged to wear pants whilst in Nursery. If they are having a lot of accidents then we may put a pull up over the pants.
- Using the potty or toilet in the nursery will be rewarded in line with the schools behaviour policy or in special circumstances using an individual sticker chart.
- Soiled clothes and pants will be returned to parents in nappy bags.
- Key workers will communicate with parents at the end of the day how successful toilet training has been.
- Potties will be emptied into the toilet and cleaned using disinfectant after every use. Staff should wear gloves to do this.
- If a child requires help in wiping themselves after using the toilet then staff should wear gloves and use toilet training wipes that can be flushed down the toilet.

Showering:

If a child has had a bad toilet accident in Nursery, then they may require a shower. The shower is in the change room so ensures complete privacy. The Nursery teacher should be informed if a child needs showering to enable staff to be deployed appropriately to maintain the correct ratios in Nursery. The child's parent should always be informed if their child has had to be showered in Nursery.

Showering Procedure:

- Two adults are required to shower a child.
- Put on gloves and apron. Put shoe covers on if required.
- Remove the child's clothes and put anything soiled into a plastic bag and tie up. Badly soiled pants can be thrown away (put in a nappy bag first).
- Turn the shower on (pulling the cord near the door first).
- Test the water and make sure it isn't too hot. Make sure water is tested on skin that doesn't have gloves on.
- Ask the child to stand in the shower area.
- Use the shower head to rinse the child.
- Dispense foam soap into hands and lather.
- Rub the child with the soap and rinse clean.
- Repeat as necessary.
- When clean turn off shower and remove gloves.

- Dry the child using a clean towel.
- Dress the child in clean clothes (borrowing from Nursery where necessary).
- Return the child to Nursery.
- Remove apron.
- Wash towel.
- Turn off shower using pull cord near the door.
- Put up caution wet floor signs if the floor is very wet.
- Inform the cleaner when the shower has been used in order for it to be cleaned appropriately.

Dealing with feedback and complaints:

People have the right to express their dissatisfaction if they feel that they are not receiving the levels of support they need and deserve. Bushfield Infant School Nursery will respond positively to feedback and complaints and treat them as an opportunity to improve the services we provide to children. Please refer to the School's Complaints procedure for further information.

This Intimate and Personal Care Policy will be available for parents and has been endorsed by the Governing Body of the school, who will review it at periodic intervals.