



## Early Years Intimate Care Policy

### Definition

Intimate personal care includes hands-on physical care in personal hygiene and physical presence or observation during such activities. Intimate personal care tasks can include:

- Toileting, wiping and care in the genital and anal areas.
- Dressing and undressing.
- Application of medical treatment, other than to arms, face and legs below the knee.
- Supporting the change of sanitary protection.

This policy applies to all staff undertaking personal care tasks with children but particularly to those who are in the Early Years Foundation Stage.

Intimate care routines are essential throughout the day to ensure children's basic needs are met. This may include nappy changing, supporting children with toileting, changing clothes where required, first aid treatment and specialist medical support. In order to maintain the child's privacy, the majority of these actions will take place on a one-to-one basis and, wherever possible, will be supported by the child's key person.

We wish to ensure the safety and welfare of the children involved in intimate care routines and safeguard against any potential harm, as well as ensuring the staff member involved is fully supported and able to perform their duties safely and confidently.

Through the following actions we will endeavour to support all parties:

- Promote consistent and caring relationships through the key person system in the nursery and ensure all parents understand how this works
- Ensure all staff undertaking intimate care routines have suitable enhanced DBS checks
- Train all staff in the appropriate methods for intimate care routines and access specialist training where required, i.e. first aid training, specialist medical support, and recording documentation
- Conduct thorough inductions for all new staff to ensure they are fully aware of all procedures relating to intimate care routines. Follow up on these procedures through supervision meetings and appraisals to identify any areas for development or further training
- Working closely with parents on all aspects of the child's care and education. This is essential for intimate care routines, which require specialist training or support. If a child requires specific support, the Nursery Manager will arrange a meeting with the parent to discover all the relevant information relating to this, to enable the staff to care for the child fully and meet their individual needs

Mayville High School will ensure all staff have an up-to-date understanding of safeguarding/ child protection and how to protect children from harm. This will include identifying signs and symptoms of abuse and how to raise these concerns in the most appropriate and speedy manner. The setting operates

a whistleblowing policy as a means for staff to raise concerns relating to their peers. The Nursery Manager will support this by ensuring staff feel confident in raising worries as they arise in order to safeguard the children in their care. Regular working practice observations on all aspects of operations, including care routines are also undertaken to ensure that procedures are working in practice and all children are supported fully by the staff. This includes intimate care routines such as Nappy Changing and toileting.

Nappy changing is a personal time and the child's privacy should be respected. Staff must wear appropriate PPE whenever changing a nappy. Changing time is an opportunity for a one-to-one relationship between the staff member and the child. It should be a positive, warm, caring experience, with the adult engaging in conversation with the child, making eye contact and interacting with the child throughout the task.

This routine should be carried out in a relaxed, reassuring and unhurried manner that will encourage children to feel safe.

The changing areas should have the following;

- Baby wipes
- Disposable gloves/aprons
- Disinfectant spray / Disposable roll wipe

### **Nappy Changing Procedure**

Staff must wear disposable gloves and aprons when appropriate, dealing with body fluids. Children may be changed at a changing station or standing in a cubicle if toilet training.

Children MUST NEVER be left unattended on the changing stations. The staff member must physically have contact with the child throughout the nappy changing process. Nappies should be removed, retaining any soil matter within the nappy, and securing the existing sticky tapes. The nappy must be placed into a small nappy sack, then placed into the disposal unit provided. Parents provide nappies for their children, which can either be stored in named baskets or in the child's bag. The change area must be tidied and sterilised using the disinfectant spray and disposable roll wipe after each nappy change. Staff should remove the disposable gloves/apron and must wash their own hands before returning to the play area. Nappy changes are recorded in the first instance on a daily sheet and then for children in Swans on individual care diaries on Tapestry. Nappies are changed at regular set times throughout the day or as required in the case of soiling or being very wet.

Nappy changing facilities are located within Swans and in the toilet area next to Kestrels. Children's privacy is considered whilst balanced with safeguarding staff. Staff always let another member of staff know when they are changing a child and keep the door open, ensuring that the child's dignity is maintained by ensuring they are stood in front of the child. When changing a child on the changing table next to Kestrels, the child should be laid down with their head towards the door. Staff consider when and where to change children, for example not at busy pick up times when there are parents coming in and out of the room. In this instance, if a child has wet or soiled it will be considered to wait a few minutes to take the child to be changed.

### **Lower 1**

The normal range of development for this group of children indicates that they may not be fully toilet-trained for many reasons. In addition to this, there are other vulnerable groups of children and young people that may require support with personal care on either a short-term, longer, or permanent basis due to SEN and disability, medical needs or a temporary impairment. This could include children and young people with limbs in plaster, and children and young people needing wheelchair support.

At Mayville High School we are committed to providing personal care that has been recognised as an assessed need and is indicated in a care plan for an individual child, in ways that:

- Maintain the dignity of the individual child.
- Are sensitive to their needs and preferences.
- Maximise safety and comfort.
- Protect against intrusion and abuse.
- Respect the child's right to give or withdraw their consent.
- Encourage the child to care for themselves as much as they are able and protect the rights of everyone involved.

## Toilet Training

Starting school is an important and potentially challenging time for both the child and the school that admits them. It is also a time of growth and very rapid developmental change for all children and there is wide variation in the time at which children master the skills involved in being fully toilet trained. For a variety of reasons children may:

- Be fully toilet-trained.
- Have been fully toilet trained but regress for a little while in response to the stress and excitement of beginning school.
- Be fully toilet trained at home but prone to accidents in new settings.
- Be on the point of being toilet trained but require reminders and encouragement
- Be toilet trained for passing urine but incontinent of stools.
- Not be toilet-trained at all but likely to respond quickly to a well-structured toilet training programme.
- Be fully toilet-trained but have a disability
- Have delayed onset of full toilet training in line with other developmental delays but will probably master these skills during the Foundation Stage.
- Have SEND and might require help with all or some aspects of personal care such as washing, dressing or toileting.
- Parents will be encouraged to train their child at home as part of their daily routine.

Reinforcement of these routines whilst at school will avoid any unnecessary physical contact. If at all possible, staff will be mindful of and respect the personal dignity of the pupils when supervising, teaching or reinforcing toileting skills. Children throughout the EYFS may experience difficulties with independence and require support with intimate care issues due to an acute illness that will require short-term intervention and assistance. Admitting children who are not yet toilet trained or who have incontinence problems into school will be the decision of the Head teacher in liaison with the SENCO and/or other health professionals and teaching staff.

**Staff at Mayville High School will not begin to toilet train pupils; therefore, unless a child has a disability, as defined through legislation, it is expected that parents/carers will have trained their child to be clean and dry before they start Lower 1.**

A care plan, however, will be discussed with parents in order to support pupils with incontinence difficulties. Parents may be advised to seek assistance from their Health Visitor and or GP to seek medical advice and further support.

## Health and Safety

Mayville High School promotes the good health of children and takes necessary steps to prevent the spread of infection, and takes appropriate action if children are ill or infectious. There are procedures in place for dealing with spillages of bodily fluids, such as when a child accidentally wets or soils him/herself, or is sick while on the premises.

An assessment of suitable hygienic changing facilities will take place. Whenever possible, a child will be changed in a toilet cubicle standing up. For those children who require regular assistance, a designated space will be provided.

## Challenges

It can take around ten minutes to change an individual child. The resource allocation of staff time is an important consideration. Changing time can be an opportunity to promote independence and self-worth. Children will be encouraged to be independent in their own changing as much as possible. In practical terms, toileting issues require the provision of:

- Hot running water and soap (antibacterial where possible)
- Toilet rolls
- Antiseptic cleanser
- Bowl/bucket
- Paper towels/cloths
- Disposable aprons and gloves
- Nappy bags/sacks
- Cleaning equipment
- Bin
- Wipes
- Spare clothes (it is always useful for each child to have their own spare clothes on their peg to change into for physical and emotional comfort)

Checks should be made beforehand to ensure that suitable facilities for intimate care are available on excursions, where they will be necessary, and consideration must be given as to how intimate care can be dealt with in relation to PE, swimming, after-school clubs, transport to and from school, etc.

## Working in partnership with parents

Family members are children's first and most enduring educators. When parents and practitioners work together, the results have a positive impact on a child's development and learning. Regular consultation and information sharing remain an essential feature of this partnership. Issues around toileting should be discussed at a meeting with the parents/carers prior to admission into school. Senior leaders will be made aware of these at this point. This also provides an opportunity to involve other agencies as appropriate, such as a Health Visitor. A Care Plan should be written and agreed with all children and families where a long-term plan is required.

Parents/ Carers agree to:

- Provide a change of clothes.
- Understand and agree the procedures to be followed during changing at school.

- Inform the School if the child has any marks/rash.
- Review the arrangements, in discussion with the School, should this be necessary
- Encourage the child's participation in toileting procedures wherever possible.

The School agrees to:

- Change the child if they soil themselves or become wet.
- Inform parents if a member of staff has changed or assisted a child who has soiled themselves.
- A minimum number of changes. (2 to 3 changes within the school day, depending on the agreed arrangements for that child)
- Report to the Head or DSL if the child is distressed or if marks/rashes are seen.
- Review arrangements, in discussion with parents/ carers, should this be necessary. (consider the use of the "Eric" care plan for those children where a more formal plan is required in school)
- Encourage the child's participation in toileting procedures wherever possible.
- Discuss and take the appropriate action to respect the cultural practices of the family.
- Ensure Health Needs and Care Plans are up to date
- Refrain from entering the classroom whilst pupils are getting dressed/undressed.

## Confidentiality

Sensitive information about a child should be shared only with those who need to know, such as parents or other members of staff who are specifically involved with the child. Other staff members will only be told what is necessary for them to know to keep the child safe. Parents and children will be told that when staff have concerns about a child's wellbeing or safety arising from something said by the child or an observation made by staff, then the Safeguarding Lead will be informed. This may lead to the procedures set down in the Safeguarding Policy being implemented

Whilst changing children staff will take care (both verbally and in terms of their body language) to ensure that the child is never made to feel insecure. Best practice will be followed by ensuring that all of those involved with intimate care receive specific induction from the School on these procedures and protocols:

### During Intimate Care

- Speak to the child personally by name so that s/he is aware of being the focus of the activity.
- Give explanations of what is happening in a straightforward and reassuring way.
- Enable the child to be prepared for and to anticipate events while demonstrating respect for his/her body e.g. by giving them a strong sensory clue, such as using a sponge or pad to signal an intention to wash or change.
- Always encourage the child to attempt to wash private parts of the body independently, using wipes, a sponge or a cloth.
- Provide facilities which afford privacy and modesty e.g. separate toileting and changing for boys and girls or at least adequate screening; changing one child at a time.
- Respect a child's preference for a particular carer and sequence of care.