



**Cabot**  
Learning  
Federation

Toileting and  
Intimate Care  
Policy

---

Date Approved: March 2023  
Approved By: CLF Board  
Review Frequency: Biennial  
Next Review: March 2025

**History of most recent Policy changes**

Date	Page	Change	Origin of Change e.g. TU request, Change in legislation
Date	E.g. Whole Document	Detail of change	Reason for change
01.04.19	<b>Whole Document</b>	<b>Implementation of template CLF policy</b>	<b>Implement a federation wide policy</b>
1.3.21	<b>Whole document</b>	<b>Updated for Covid risk assessment Adopted by XXX Academy</b>	<b>Pandemic response and changes linked to other guidance</b>
26.2.23	<b>Whole document</b>	<b>Review with minor changes Adopted by Lime Hills Academy</b>	<b>Full review and full EQIA required – 2023- in line with CLF SEND Policy development and further EYFS documentation for trust.</b>

--	--	--	--

### Equalities Impact Screening

Date of screening: 26.2.23						
Name of person completing screening: S. Weaver						
	Does this policy have the potential to impact on people in any of the identified groups?		What is the expected impact of this policy on any of the identified groups			Notes
	Yes	No	Positive	Neutral	Negative	
<b>Age</b>	✓		✓			Supports SEND children joining LHA
<b>Disability</b>	✓		✓			Supports children with disabilities currently – in advance of trust SEND Policy – currently local Academy SEND Policies.
<b>Gender Reassignment</b>	✓			✓		
<b>Race or Ethnicity</b>	✓			✓		
<b>Religion or Belief</b>	✓			✓		
<b>Marriage</b>	✓			✓		
<b>Pregnancy/ Maternity</b>	✓			✓		
<b>Sex</b>	✓			✓		
<b>Sexual Orientation</b>	✓			✓		
<b>Carers / in-care</b>	✓			✓		
Should the policy have a Full Equalities Impact Assessment? No – due to this element of this policy forming part of the CLF SEND Policy which will be drafted as a new policy in 2023.						

## Contents

History of most recent Policy changes.....	2
Equalities Impact Screening.....	3
Contents.....	4
1 Policy Statement.....	5
2 Intimate Care Tasks .....	5
3 Partnership with Parents/Carers .....	5
4 Best Practice .....	6
5 Safeguarding .....	6
6 Dealing with body fluids .....	6

## **1 Policy Statement**

- 1.1 All children at Lime Hills Academy have the right to be safe and be treated with dignity, respect and privacy at all times so as to enable them to access all aspects of learning and school life.
- 1.2 At Lime Hills Academy we are inclusive in our approach and will support children and families to make sure all children are able to participate in school who may, for any reason, not yet be toilet trained or who may be wearing nappies or equivalent.
- 1.3 This policy sets out clear principles and guidelines on supporting intimate care with specific reference to toileting. It should be considered in line with our Safeguarding Policy, Health and Safety Policies, Administering of Medicines policy, and must be read in conjunction with dealing with bodily fluids guidance in Health and Safety manual under infection control.
- 1.4 Lime Hills Academy will ensure that:
  - 1.5 No child's physical, mental or sensory impairment will have an adverse effect on their ability to take part in day-to-day activities;
    - No child with a named condition that affects personal development will be discriminated against;
    - No child who is delayed in achieving continence will be refused admission;
    - Adjustments will be made for any child who has delayed incontinence;

## **2 Intimate Care Tasks**

- 2.1 This covers any tasks that involves the dressing and undressing, washing including intimate parts, helping someone use the toilet, changing nappies or carrying out a procedure that requires direct or indirect contact to an intimate personal area.

## **3 Partnership with Parents/Carers**

- 3.1 The staff team at Lime Hills Academy works in partnership with parents/carers to provide care appropriate to the needs of the individual. Toilet training is seen as a self-care skill that children have the opportunity to learn with the full support of all adults involved. Parents will be supported by the school to work in partnership towards their child's toilet training unless there are medical or other developmental reasons why this may not be appropriate at the time. If children require regular changing then a care plan will be created. The care plan will set out:
  - What care is required;
  - Number of staff needed to carry out the task (if more than one person is required , reason will be documented);
  - Additional standard equipment may be required and some equipment would be expected to be provided by parents/carers. This may include nappies, nappy sacks, spare clothes and underwear.

- In addition, it may be that provision and support required may include provision for longer term medical needs such as a changing bed or a rise and fall table if applicable; Specialist equipment will be sourced in partnership with colleagues in Health and SEND teams from the Local Authority.
- Maintenance of equipment, eg rise and fall bed, hoists to be inspected and maintained 6 monthly as per legal requirement;
- Child's preferred means of communication (e.g. visual, verbal). Agree terminology for parts of the body and bodily functions;
- Child's level of ability i.e. what tasks they are able to do by themselves;
- acknowledge and respect for any cultural or religious sensitivities related to aspects of intimate care;
- Be regularly monitored and reviewed in accordance with the child's development.

#### **4 Best Practice**

- 4.1 When intimate care is given, it will be by two members of staff (one is there in a supervisory capacity for safeguarding reasons), one member of staff tells a member of their team that they are providing intimate care and where they will be doing this.
- 4.2 The member of staff explains fully, to the child, each task that is carried out, and the reason for it. Staff encourage children to do as much for themselves as they can, lots of praise and encouragement will be given to the child when they are successful in any aspect of self-care. Staff will not apply creams but will support the child to do it themselves if medically necessary.
- 4.3 All staff have a full DBS check.
- 4.4 Particular staff members will typically be identified to change a child with known toileting and intimate care needs. Staff will record the date and time when a child has been given intimate care and this will be shared with parents/carers.

#### **5 Safeguarding**

- 5.1 Staff are trained on the signs and symptoms of child abuse through annual Safeguarding training within the Cabot Learning Federation. If a member of staff is concerned about any physical or emotional changes, such as marks, bruises, soreness, distress etc. they will inform the Designated Safeguarding Lead Officer (DSLO) immediately.
- 5.2 If a child makes an allegation against a member of staff, the Principal must be informed immediately and the procedure set out in the Safeguarding Policy will be followed.

#### **6 Dealing with body fluids**

- 6.1 Appropriate PPE will be used at all times, in line with guidance from Health and Safety teams. Urine, faeces, blood and vomit will be cleaned up immediately and disposed of safely in the appropriate bins. Nappy bins will be available when a child is still wearing nappies. When dealing with body fluids, staff wear protective clothing, disposable plastic aprons and gloves and wash themselves thoroughly afterward. Soiled children's clothing will be bagged to go home— staff

will not rinse it. Children will be kept away from the affected area until the incident has been completely dealt with.

- 6.2 All staff maintain high standards of personal hygiene, and will take all practicable steps to prevent and control the spread of infection.
- 6.3 This policy aims to manage risks associated with toileting and intimate care needs and ensures that employees do not work outside the remit of their responsibilities set out in this policy.

Signed Lis Jolley

Date: 12/3/23