



## **Toileting Policy**

### **Introduction**

The Trinity Federation of schools are committed to safeguarding and promoting the welfare of children and young people. We are committed to ensuring that all staff responsible for intimate care of children will undertake their duties in a professional manner at all times. The Toileting Policy and Guidelines regarding children have been developed to safeguard children and staff. They apply to everyone involved in the intimate care of children.

Intimate care is any care which involves washing, touching or carrying out an invasive procedure (such as cleaning up after a child has soiled him/herself), that most children can carry out for themselves, but with which some are unable to do due to physical disability, special educational needs associated with learning difficulties, medical needs or needs arising from the child's stage of development.

### **Aims**

This policy aims:

- To ensure all children are included in their school regardless of their toileting needs.
- To provide advice, guidance and reassurance to staff and parent/s.
- To safeguard the dignity, rights and well-being of children
- To assure parents that staff are knowledgeable about personal care and that their individual needs and concerns are taken into account

### **Toileting and the Foundation Stage Profile**

Curriculum guidance for the Early Years Foundation Stage is clear that the role of the adult involves supporting the child's whole development, particularly their Personal, Social and Emotional development including supporting the transition between settings. One of the Early Learning Goals for children to achieve by the end of the Foundation Stage is to "manage their own basic hygiene and personal needs successfully, including dressing and undressing and going to the toilet independently". Parents can expect to work in partnership with schools and settings. Children who need assistance with

toilet training or special toileting arrangements must be treated with respect, dignity and sensitivity. Children with long-term toileting requirements as part of complex medical or physical needs may require additional assistance to manage their personal care needs in settings and schools. Staff are required to contact the appropriate external agencies working with the child for advice.

### **Parental responsibility**

Partnership with parents is an important principle in any educational setting and is particularly necessary in relation to children needing intimate care. Much of the information required to make the process of intimate care as comfortable as possible is available from parents. Prior permission must be obtained from parents before intimate care procedures are carried out. Parents should be encouraged and empowered to work with staff to ensure their child's needs are identified, understood and met. This will include involvement with Individual Education Plans (I.E.Ps), Health Care plans and any other plans which identify the support of intimate care where appropriate. Exchanging information with parents is essential through personal contact, telephone or correspondence.

### **What the school expects of parents:**

- Parents/carers will discuss any specific concerns with staff about their child's toileting needs.
- Parents/carers must inform the school if a child is not fully toilet trained before starting school, after which a meeting will then be arranged to discuss the child's needs.
- Parents should be provide plenty of changes of pants/clothing in case of accidents when a child is toilet training.

### **Staff responsibilities**

1. Alert another member of staff.
2. Escort the child to a changing area i.e. designated toilet areas where the child can be changed. If this is not available then a private, safe location should be used that protects the dignity of the child without compromising staff. In Nursery a changing table is used to avoid staff having to kneel on the floor.
3. Collect equipment and clothes. School will provide spare clothes in an emergency but it is always better for a child to wear his/her clothes.
4. Adult should wear gloves.

5. Child to undress as appropriate and clean themselves as much as possible under the verbal guidance of an adult.

6. Soiled clothes to be placed inside a yellow body spill bag or carrier bags (double wrapped) and to be given to parents at the end of the day. Plastic gloves should be disposed of in the designated bin.

7. Adult should wash their hands thoroughly and the area should be cleaned.

If a Nursery child has had a toileting accident then incidents must be recorded in the Toileting Record Book which is kept in a locked cupboard in Nursery. The record will include details such as date, time, name of child, adult(s) in attendance, nature of the incident, action taken and concerns or issues. This will also monitor progress made. Parents/Carers will be informed either verbally or a message will be written in the home communication book.

### **Special educational needs and child protection issues**

The school recognises that some children with SEN and other children's home circumstances may result in children arriving at school with under developed toilet training skills. If a child is not toilet trained because of a disability his/her rights to inclusion are additionally supported by the SEN & Disability Act 2001 & Part 1V of the disability Discrimination Act 1995.

If a child's toileting needs are substantially different than those expected of a child his age, then the child's needs may be managed through an Individual Health Plan, School Care Plan, or alternatively they may be considered to require SEND Support under the SEND Code of Practice. In such cases, every effort will be made to ensure that appropriate reasonable adjustments are made. A toileting program would be agreed with parents which may be in conjunction with a Health Professional. Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the toileting plan. If there is no progress over a long period of time, e.g. half a term, the SEND Co-ordinator, teaching staff and parents would seek further support, e.g. G.P's referral of child for specialist assessment.

Some children may be in receipt of an Education, Health and Care Plan. The Education, Health and Care Plan will outline the child's needs, and the educational provision required to meet these needs and outcomes. The Education, Health and Care Plan will identify delayed self help skills and state the support required to develop these skills.

The management of all children with intimate care needs will be carefully planned. Where specialist equipment and facilities above that currently available in the school are required, every effort will be made to provide appropriate facilities in a timely fashion, this could involve assessment by a Physiotherapist and/or Occupational Therapist.

### **Child Protection**

Careful consideration will be given to individual situations to determine how many adults should be present during intimate care procedures. It is acceptable for only one member of staff to assist however the member of staff must ensure they are visible whilst ensuring privacy for the child. If there is an implication for safe moving and handling of the child a risk assessment must be carried out and

recorded. The needs and wishes of children and parents will be taken into account wherever possible, within the constraints of staffing and equal opportunities legislation.

If a member of staff has any concerns about physical changes in a child's presentation (unexplained marks, bruises or soreness for example) the recognised child protection procedures should be followed. If a member of staff notices any changes to a child either physically or emotionally following an episode of intimate care, the matter will be investigated at an appropriate level and outcomes recorded. Parents/carers will be contacted at the earliest opportunity. Local Child Protection procedures will be adhered to at all times.