Janvrin School



Intimate Care Policy

June 2026

Policy Standards and Principles

Achieving continence is one of many milestones which children are expected to reach before they start school. However, for a variety of reasons, a number of children may not manage to achieve this prior to starting school. If not managed correctly, wetting and/or soiling problems can cause high levels of stress for children, parents and teaching staff.

Janvrin School, in line with the States of Jersey Department for Education, adopts the principles of The School's Admission Code (DfE, 2012) which states that it is for admission authorities to formulate their admission arrangements, but they must not discriminate against or disadvantage children with disabilities or those with special educational needs.
It is not acceptable to refuse admission to school to children who are delayed in achieving continence.

Definition

Intimate personal care includes hands-on physical care in a child's personal hygiene, and physical presence or observation during such activities.

Intimate personal care tasks can include:

- body bathing other than to arms, face and legs below the knee
- 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 with the changing of sanitary protection.

Our Commitment:

Janvrin is committed to ensuring that all staff responsible for the intimate care of children will undertake their duties in a professional manner at all times. Janvrin recognises that there is a need to treat all children with respect when intimate care is given. No child should be attended to in a way that causes distress or pain.

Our Aim:

- The child who requires intimate care will be treated with respect at all times; the child's welfare and dignity is of paramount importance.

- Staff will encourage each child to do as much for him/herself as he/she can. This may mean, for example, giving the child responsibility for washing themselves.

- Offer help to the child with their clothing & a chair if they need to sit down to balance, be sensitive of their needs and preferences.
- Model to the child what you need them to do and translate into their home language where possible.

- No closed toilet doors when offering support, unless they ask for it to be closed.

- Call parent if the child is not cooperating or if the child who is soiled cannot be cleaned to a standard without showering.

- Carry out intimate care with another adult present where possible. Protect against intrusion or abuse.
- Find a discreet area for changing that is semi-'open' so that it is visible to other staff. Respect the child's right to give or withdraw their consent.

- Wherever possible the same child will not be cared for by the same adult on a regular basis; ideally there will be a rota of carers known to the child who will take turns in providing care.

- Individual intimate care plans will be drawn up for particular children as appropriate to suit the circumstances of the child

Equipment Provision:

Parents have a role to play when their child is still wearing nappies. The parent should provide nappies, disposal bags, wipes, and a change of clothes and parents should be made aware of this responsibility.

As a school we are responsible for providing gloves, plastic aprons, a bin and liners to dispose of any waste and spare clothes if needed.

Physical Contact:

- All staff engaged in the care and education of children and young people need to exercise caution in the use of physical contact.
- The expectation is that staff will work in 'limited touch' cultures and that when physical contact is made with pupils this will be in response to the pupil's needs at the time, will be of limited duration and will be appropriate given their age, stage of development and background.
- RPI (Restricted physical intervention)
- Under no circumstances would it be permissible to use physical force to modify behaviour, or to make a pupil comply with an instruction.

Pupils in distress:

There may be occasions when a distressed pupil needs comfort and reassurance that may include physical touch such as a caring parent would give.

Staff must remain self-aware at all times to ensure that their contact is not threatening or intrusive and not subject to misinterpretation.

Judgement will need to take account of the circumstances of a pupil's distress, their age, the extent and cause of the distress.

Toilet Training

Starting school or nursery has always been an important and potentially challenging time for children, families and the schools that admit them. It is also a time of growth and very rapid developmental change for all children. As with all developmental milestones in the EYFS, 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 in the EYFS may:

- be fully toilet trained across all settings;
- have been fully toilet trained but regress for a little while in response to the stress and excitement of beginning EYFS;
- be fully toilet trained at home but prone to accidents in the new setting;
- be on the point of being toilet trained but require reminders and encouragement;
- 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 serious disability or learning difficulties;
- have delayed onset of full toilet training in line with other development delays but will probably master these skills during the EYFS;
- have SEN/D and might require help (during the EYFS and beyond) with all or some aspects of personal care such as washing, dressing or toileting.

Partnership Working

Parents are children's first and most enduring educators. When parents and practitioners work together in early year's settings, the results have a positive impact on children's development and learning. **Early Years Foundation Stage (Card 2.2 Positive Relationships: Parents as Partners)**

Issues around toileting should be highlighted by the parents/carers at this time.

Support in this area for families can be gained by contacting the School's Health Officer: Health Visiting Team, Family Nursing and Home Care, Le Bas Centre, St Saviour's Road, St Helier, JE2 4RP, Tel. 497600.

When the School is aware of continence delay or difficulties, staff will make an agreement with the families.

Partnership Working: children with a SEN or Disability

If the child or young person has a disability, wherever possible the child or young person will be encouraged to do as much as they can for themselves.

In a very small number of cases, the process for the management of a child's personal care needs may need to be further clarified through a Toilet Management Plan or Health Care Plan. See appendix. This will be decided by the school staff depending on the level of need required to support a child's toileting. This plan will be constructed alongside discussions and agreements with parents.

Where parents/carers disagree with the proposed plan then the school will seek the advice of the Heath Officer for the school and may seek intervention and support from other outside agencies (including the Education Department and Safeguarding Officer).

Partnership Working: raising concerns

Where appropriate, parents and Janvrin School staff will need to agree a toilet training programme (for those children who do not have SEN or a disability).

In the very small number of cases where parents do not co-operate or where there are concerns that:

- The child is regularly coming to school in very wet or very soiled nappies/pull ups and there is evidence of excessive soreness that is not being treated;
- The parents are not seeking or following advice.

In the first instance concerns should be raised with the parents. A meeting may be called that could possibly include the Health Visitor and Head teacher to identify the areas of concern and how all present can address them. If these concerns continue there should be discussions with the school's safeguarding co-ordinator about the appropriate action to take to safeguard the welfare of the child.

Safeguarding

The safeguarding and welfare requirements are designed to help providers create high quality settings which are welcoming, safe and stimulating and where children are able to enjoy learning and grow in confidence. **(Early Years Foundation Stage Statutory Framework p.13, 2012)** Janvrin School will comply with States of Jersey Safeguarding Policies.

Staff should be aware of these guidelines and encouraged to follow them for their own protection as well as for the protection of the children.

Policies and procedures should be in place as part of a safeguarding framework relating to safeguarding both children and adults. It is also important that school leaders ensure staff are supported and trained so that they feel confident in their practice. DBS checks are rigorous and are carried out to ensure the safety of children with staff employed in schools and settings. All schools/settings have a duty to ensure staff are not employed without a current DBS check. This must be checked before allowing staff to change children. It is essential that safer working practices are adhered to and that no setting or school simply relies on the results of a DBS check to ensure that staff are working appropriately.

It is advisable that the adult who is going to change the child informs the teacher and/or another member of staff that they are going to do this. There is no written legal requirement that two adults must be present. However, where there is known risk of false allegation by a child, a second member of staff should be present in order to completely secure against any risk of allegation. The relevant UK guidance may be found in Section 23 in the DSCF (now DfE) Guidance 'Guidance for Safer Working Practice for Adults working with Children and Young People in Education settings' (March 2009).

Health and Safety

The provider must promote the good health of children attending the setting and take necessary steps to prevent the spread of infection, and take appropriate action if children are ill or infectious. **(Early Years Foundation Stage Statutory Framework p.21, 2012)**

Janvrin School has procedures in place for dealing with spillages of bodily fluids such as the process to be followed when a child accidentally wets or soils himself, or is sick while on the premises. The same precautions will apply for nappy/pull-ups/changing. This could include:

- Staff to wear fresh disposable aprons and gloves while changing a child
- Soiled nappies/pull-ups securely wrapped and disposed of appropriately
- Changing area/toilet to be left clean

- Caretaking/cleaning staff to be informed
- Hot water and soap available to wash hands as soon as changing is done
- Paper towels to be available to dry hands.

For wet nappies a single bag is sufficient but soiled nappies require double bagging.
Further information and guidance is available from: ERIC-'The Right to

Go'

http://www.eric.org.uk/assets/downloads/104/The%20Right%20To%20go%20WEB%20%20Guide%2012.2012.pdf

PromoCon-Managing Bowel and Bladder Problems in Schools and Early Years Settings http://www.disabledliving.co.uk/DISLIV/media/promocon/PromoconBooklet.pdf

"Lancashire Guidance Notes for Schools"

http://www.disabledliving.co.uk/DISLIV/media/pdf/LancashireSchoolsDocument.pdf?ext=.pdf

PromoCon Teaching Pack http://www.disabledliving.co.uk/DISLIV/media/pdf/teachingpack.pdf

Janvrin School

Appendix:
Child's Name: .....

Class/Year Group: ..... Name of

Support Staff Involved: .....

Date of Record: ..... Review Date: .....

Area of Need
Equipment required
Location of suitable toilet facilities

Support required	Frequency of support

School will	Parents will	Child will try to	Target achieved (date)

Signed:

Parent/carers

Signed: Member

of staff Signed:

Child (if appropriate)

Nappy Changing Chart			
WB:		Key:	D=dry W=wet BM=bowel movement
Staff member	Time	Date	Notes

Further information:

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Child's Name: ..... **Name of School:** .....

Date of Risk Assessment: .....

		Yes	Notes
1.	Does weight/size/shape of pupil present a risk?		
2.	Does communication present a risk?		
3.	Does comprehension present a risk?		
4.	Is there a history of child protection concerns?		
5.	Are there any medical considerations? Including pain/discomfort?		
6.	Has there ever been allegations made by the child or family?		
7.	Does moving and handling present a risk?		
8.	Does behaviour present a risk?		
9.	Is staff capability a risk? (back injury/ pregnancy)		
10.	Are there any risks concerning individual capability (pupil)? • General fragility • Fragile bones • Head control • Epilepsy • Other		
11.	Are there any environmental risks? • Heat/cold		

If Yes to any of the above complete a detailed personal care plan.

Date: .....

Signed: .....

Name: .....

Daily Toileting Recording Sheet

Name: _____ Day: _____ Date: _____

Please check your child's pants every hour.

Please place a tick in the appropriate column every time you check your child's pants or whenever they have an accident.

For example, if the pants are wet place a tick in the Pants Checked and Urine in Pants columns.

Time	Pants Related		Bowel Motion in Pants	Indicated Need to Use Toilet	Taken by Carer	Went by Self	Toilet Used: Urine or Bowel (U or B)	Comments
	Pants Checked	Urine in Pants						