

Our Motto: Aim High, Learn Together, Feel Proud!

1. Aims and objectives:

- 1.1 The aim of this policy is to support the school in promoting inclusion and ensuring the wellbeing of all pupils. It offers practical advice as well as clarification of the support and information available.
- 1.2 Whilst we expect almost all children to be toilet trained by the age of three, or when they start nursery, we understand that some children may have additional needs that prevent this from happening. This policy will define what the school will do to promote inclusion and also what families can do to help their child become toilet trained where possible.
- 1.3 To safeguard the health and well-being of all pupils.

2. Expectations regarding all children:

School

- 2.1 The school expects that almost all children will be toilet trained by the time they start Nursery.
- 2.2 School staff change children who accidentally wet or soil themselves provided they are already appropriately toilet trained.
- 2.3 Staff will change a child in sight of another adult. If for any reason it is not possible to have two adults present the door to the room where the child is being changed should not be closed.
- 2.4 Appropriate equipment, i.e. latex gloves, plastic liners or aprons, wet wipes, appropriate waste disposal bags and bin should all be available for staff use. This will all be kept in the designate changing unit.
- 2.5 The school is not responsible for toileting training pupils

Parents

- 2.6 The school expects all parents/carers to do their utmost to have their child toilet trained before they start nursery.
- 2.7 Their parent/carer should change children who are not yet toilet trained and do not have extenuating circumstance e.g. medical diagnosis or SEND needs if they soil themselves.
- 2.8 Parents/carers should not send their child to school in pants/knickers until children have shown, at home, that they have bowl control for at least two weeks.
- 2.9 Children should wear a pull up until they are toilet trained. At home, clean pull up should be applied at the last minute before children attend the session.
- 2.10 Parents/Carers to sign and follow a toilet management plan to ensure children are toilet trained at the earliest possible time once the child has started.
- 2.11 Parents must seek advice from outside sources i.e. GP or Health visitor if their child is not toilet trained following the toilet management plan.

3. Expectations regarding children with SEND who are not yet toilet trained:

School

- 3.1 School staff will normally change children who wet or soil themselves.
- 3.2 The school will ensure that two members of staff will be present when changing nappies/pull ups.
- 3.3 Where visual prompt/communication cards are used, the school will ensure that parents/carers have the same symbols for home use.
- 3.4 The school will give feedback to parents/carers where necessary and review arrangements where appropriate.
- 3.5 The school advise parents/carers to contact their Health visitor, GP or other relevant professionals to discuss toilet training at home.
- 3.6 The school will support any toilet training that has already begun at home.

Parents

- 3.7 Their child will be sent to school in pull ups, not nappies except in very exceptional circumstances associated with a disability.
- 3.8 Parents/carers will provide the school with spare pulls and a change of clothing.
- 3.9 Parents/carers will inform the school should the child have any marks/rash.
- 3.10 Parents/carers will consult external agencies (for example the Health visitor, GP or other relevant professionals), if they have considered the following;
 - Is the wetting/soiling unusual for the child's age or their stage of development?
 - Has the toileting programme/training been unsuccessful?
 - Have you made all the reasonable adjustments and minor alterations you can, to make the child feel more relaxed and confident about using the toilet?

4. Touch and Physical Contact

Touch and physical contact are essential at Westbrook Primary School in order to provide sensitive, high quality care and individual educational support. Used in context and with empathy, touch supports the development of natural interactions with the pupils we teach and care for.

We acknowledge the importance of ensuring that this touch and physical contact is safe, welcomed and used to enhance opportunities and relationships for our pupils.

Some pupils have additional learning needs and some have vision impairments. Therefore, touch and physical contact play an essential role in the day-to-day life at Westbrook.

Some of our pupils are tactile-defensive so this has to be taken into account when touch or physical contact needs to take place.

This policy sets out the reasons for physical contact between staff and pupils, and between pupils, and provides guidance for use in such situations.

Purpose of touch and physical contact at Westbrook Primary School

The main reasons for touch and physical contact at Westbrook are:

- To provide a sighted guide to visually impaired pupils
- To carry out personal and intimate care
- To provide support with self-care routines such as toileting or washing
- To give medical and nursing care
- To provide a physical cue, alongside a verbal cue for pupils to anticipate or to be aware of what is going to happen

However, touch and physical contact may be used for a number of other reasons, including:

Communication

- Placing a hand on someone's shoulder, arm or hand when speaking to them
- Greeting someone e.g. shaking hands or touching their hand to announce a person's presence and proximity
- Supporting early communication (e.g. sensitively directing, guiding, supporting children in an educational task)

Learning

- To assist, prompt and enable interactions with peers and staff
- To support engagement with resources and classroom activities
- To offer physical support with an activity during teaching a skill, e.g. hand over hand cutting, playing a musical instrument
- To offer physical support to access a lesson e.g. art & craft
- To support physical activity during PE
- To assist use of the trampoline
- Within the swimming/hydrotherapy pool

Transitioning

Offering a hand or arm to guide or prompt a pupil during changes between activities / environments.

Playing

Many play activities naturally involve touch or physical contact.

Therapy

- Sensory stimulation
- Physiotherapy
- Occupational therapy

Emotional support

- To communicate affection and warmth
- To give reassurance
- To comfort a pupil in distress

Reducing the risk of harm

- To protect pupils from danger by physically intervening when physical intervention is warranted to manage risk behaviours
- To avert danger to the pupil or pupils in an emergency situation

Early Years and Foundation Stage (EYFS)

Pupils working within the Early Years and Foundation Stage are by definition much younger than pupils elsewhere in the school. Many may have impaired development of emotional and physical skills and abilities. Pupils are encouraged to develop meaningful relationships with the members of staff that they work with on a daily basis. This often involves physical contact. Many statements from the Personal, Social and Emotional Development area of the EYFS framework explain how very young pupils need consistent physical contact and reassurance from a familiar adult.

Personal and Intimate Care

On a day to day basis, members of staff will, at times, work with pupils of the opposite sex, this is accepted as good care practice. Westbrook Primary School's policy dictates that in these circumstances the staff will fulfil their duties with respect for the pupil, regardless of the gender or disability of either party.

It is however, acknowledged that male members of staff are not authorised to deal with personal hygiene issues in relation to female pupils. If no female is available, a senior member of staff must be contacted for further direction.

Personal Care

Personal care covers a variety of forms of support for a pupil including:

- Eating or drinking (including all forms of tube feeding)
- Toileting (including in relation to the process of menstruation)
- Washing or bathing
- Dressing or undressing
- Oral care
- Care of skin or hair
- Administering medication e.g. injections, topical creams such as sun cream
- Care of a tracheostomy

In providing any form of personal care, staff must be aware of the fact that they will be in close personal contact with the pupil and they should determine in advance how the pupil may feel about this. Staff need to be aware of their own body position and whether the pupil may show signs of being uncomfortable about their proximity.

It is inevitable in the undertaking of personal care that some form of contact will be made, which each pupil will experience differently and not always consistently (depending on their mood etc.). Staff must learn how individuals feel about the personal care they are receiving from them at any time and must show the pupils respect and dignity at all times. Staff should be prepared to take into account any cultural factors that might affect individual pupils.

Intimate care

We recognize that some adults have been known to use intimate care as an opportunity to abuse children, with physical contact sometimes part of a process of 'grooming'. It is also well established that, for a number of reasons, disabled children are at particular risk of significant harm or abuse. Through its policies and procedures, Westbrook Primary will always seek to present a hostile environment for potential abusers and all staff will, therefore, need to bear in mind that the practice of intimate care and physical contact could be open to misinterpretation if our procedures are not followed.

Pupils who require help with intimate personal care that could include pad changing, dressing, washing, bathing etc. are probably most at risk of inappropriate touching and physical contact. Staff are at risk of accusations and allegations made against them whilst carrying out such tasks and we have a duty of care to protect them as well from false allegations or misunderstandings that might arise.

Therefore we encourage pupils to do as much for themselves as possible in respect of any aspect of intimate personal care as part of their personal and social development, and for staff to carry out these tasks only when the pupil is clearly unable to do so.

It is **never** appropriate for staff to touch a pupil's intimate body areas except as part of personal or medical care. It is not appropriate for staff to kiss pupils and pupils must be discouraged from kissing staff.

Guidelines for staff

Staff need to be clear and open about why they are using touch and be able to explain their practice. There must be clarity and transparency in issues of touch and physical contact. The use of touch should be discussed openly between staff. People of any age can want and need physical support and touch. Staff may be concerned about the issue of age-appropriateness. However, the developmental age and emotional and communication needs of the individual are far more important than actual age. While gender and cultural factors have relevance in issues of touch, the emotional and communication needs of the individual are due equal consideration.

As far as possible, consent to any touch should be sought in advance from the pupil involved and staff should be sensitive to any verbal or non-verbal communication the pupil gives that might indicate that they do not want to be touched. Staff need to bear in mind that for touch to provide positive experiences it must be consensual. Staff should be sensitive to any changes in the pupil's behaviour (e.g. overexcitement or negative reactions) that might indicate the need to reduce or withdraw touch; particularly from those pupils who are non-verbal.

The pupils we support need to be given opportunities to touch each other in an appropriate way while interacting and playing, as would happen naturally for any child or young person. However, staff need to ensure that both parties are happy with this.

Staff must be aware of potential hazards in respect of sexual issues:

- Staff must be sensitive to the danger of touch being misinterpreted and triggering sexual arousal, and they must therefore be alert to all feedback signals from the pupil they are working with.
- Due to their visual impairment, some pupils we support may occasionally inadvertently touch intimate parts of a member of staff's body when there is no sexual intent or understanding. The member of staff should withdraw without giving significant negative feedback in such a situation. The incident should be monitored and reported to a Designated Safeguarding Lead (DSL)
- If staff are in any doubt about issues concerning appropriate touch or physical contact or observe any practice that causes concern they should discuss this with the Designated Safeguarding Leads DSL's.
- The best way to protect both staff and pupils is to ensure that all forms of touch and physical contact are open to the scrutiny and observation of others. However, we acknowledge that there will be times when carrying out various activities that staff will be working 1:1 with pupils, and staff need to be aware of the potential risks that such situations will present.

At Westbrook Primary School our clear message to staff is that as far as possible all appropriate touch and physical contact should be in clear view and with other adults present wherever possible.

If the touch or physical contact involves personal care, two members of staff should be present wherever possible.

5. Monitoring and review

- 5.1 The coordination and monitoring of the Early Years Foundation Stage is the responsibility of the named Early Years Leader.
- 5.2 The Early Years Leader will consult the Inclusion Leader and the Head Teacher when reviewing the policy.
- 5.3 The policy will be reviewed sooner if there are any national changes made regarding SEND and or inclusion in schools.

Draft: September 2020

Agreed: October 2020

Reviewed: May 2022

Appendix 1

Toilet management plan

The aim of this plan is to encourage and support you to have your child toilet trained within the next month now that they are 3 or 4.

Child's Name:.....

Date:..... **Review date:**.....

Area of need:
Support required by family/school:

Working towards independence:

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

Westbrook Primary School –
Touch, Physical contact and Personal and Intimate Care Policy

Signed:..... **Parents/Carers**

Signed:..... **Member of staff**