Heatherley Primary School

Toileting Policy

Reviewed April 2024

Date of Next Review September 2025

EYFS Lead: Tyler Lieber

Introduction:

Some comments in the news:

'.... report revealed that teachers lose more than a million hours every year teaching children basic hygiene and how to use the toilet.'

'The average age for starting to potty train is anywhere between 18 months and two and a half years.'

'We can't teach children properly unless parents send them to school with the basic life skills. We are teachers.'

Children in the Nursery Stage need to:

- 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 the Foundation Stage
- 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
- have SEN-D or medical issues that makes it unlikely that they will be toilet trained during the Foundation Stage

It could take ten minutes or more to change an individual child. This is not dissimilar to the amount of time that might be allocated to work with a child on an individual learning target, and of course, the time spent changing the child can be a positive, learning time. However, if several children with continence needs enter Foundation Stage, there are clear resource implications.

Within our school, if a child has incontinence issues, the parents should speak to the foundation stage teachers, SENCo and/or Head Teacher to ensure the additional resources from the school's resources are allocated to the Foundation Stage to ensure that the children's individual needs are met. This conversation needs to take place as soon as the staff member is made aware of continence needs of a child; if this information should be relayed to the staff member by the family member they meet with, during the FIRST school visit and certainly NOT the first day the child starts officially at this school to be able to meet the child's need and put a care plan in place.

Staff Responsibilities:

One or more of the early years' practitioners including teaching assistants will undertake most of the personal care. School needs to ensure that this issue is addressed as appropriate within overall staffing. Teachers are responsible for facilitating, supporting and releasing teaching assistants to fulfil this role. In the interests of Health & Safety, it is unreasonable for staff to be expected to change a child who regularly soils unless the child has a medical condition as an underlying cause (parents/carers will be expected to present proof of this to the school). School does not have staffing levels to accommodate support teachers regularly leaving the class to attend to an individual's hygiene.

Staff will:

- ensure that children in our care are comfortable and happy at all times
- safeguard the rights and promote the welfare of children
- provide guidance and reassurance to staff who are required to change children
- assure parents/carers that staff are knowledgeable about personal care and that their individual concerns are into account
- protect children from discrimination and ensure the inclusion of all

What the school expects of parents/carers:

- Parents/carers will ensure that their child is continent before admission to school (unless the child has additional needs)
- 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/carers accept that on occasions their child may need to be collected from school.
- Parents will provide the correct resources to school (including nappies, wipes and nappy sacks)

We expect parents/carers to have used the summer holidays, Christmas holidays or Easter Holidays prior to their child starting school to toilet train their child if they are not already toilet trained.

Special educational needs and child protection issues:

The school recognises that some children with SEND and other children's home circumstances may result in children arriving at school with under developed toilet training skills. If a child's toileting needs are substantially different than those expected of a child his/her age, then the child's needs may be managed through an Individual Care Plan or alternatively they may be considered to be at the SEND support stage in the SEN Code of Practice due to a medical need or global developmental delay in their self-care skills. A toileting program would be agreed with parents/carers as advised by a Health Professional. Arrangements will be discussed with parents/carers on a regular basis and recorded on the toileting care plan. If there is no progress over a long period of time, e.g. half a term, the SEND Co, teaching staff and parents would seek further support, e.g. G.P's referral of child for specialist assessment. Some children may have an Education and Health Care Plan before entering school. The plan will outline the child's needs and objectives and the educational provision to meet these needs and objectives. The EHCP will identify delayed self-help skills and recommend a program to develop these skills. Where specialist equipment and facilities above the resources that are in school are required, every effort will be made to provide appropriate facilities in a timely fashion, following assessment by a Physiotherapist and/or Occupational Therapist. The normal process of assisting with personal care, such as changing a nappy should not raise child protection concerns. DBS checks are rigorous and are carried out to ensure the safety of children with staff employed in our school. Section 18 in the Government guidance 'Safe Practice in Education' states that: 'Staff should ensure that another appropriate adult is in the vicinity and is aware of the task to be undertaken.'

In some cases, school may have to ask parents to come and change their child as resources are limited (a child may need more intimate care), as leaving a child soiled, which could be considered to be a form of abuse since it places the child at risk of significant harm.

The process for the management of a child's personal care needs may need to be further clarified through a 'Personal Care Plan'. For example, where the school has concerns about parental support, for children transferring to FS2 or above who are not toilet trained and for children with SEND.

Should a child with complex continence needs be admitted, the child's medical practitioners will need to be closely involved and a separate, individual toilet-management plan may be required. School will work in partnership with parents/carers when a child enters school in a nappy or pull-ups or with continence problems. This agreement helps to avoid misunderstandings and also helps parents/ carers feel confident that the school will meet their child's needs.

Legislative Framework All settings and Schools must adhere to:

· The Equality Act 2010

· Children and Families Act 2014

· The Special Educational Needs and Disability Code of Practice: 0 to 25 years (January 2015)

· Early Years Foundation Stage 2017

· Supporting pupils at school with medical conditions (December 2015)

· Keeping Children Safe in Education 2014

· Excellence in continence care: Practical guidance for commissioners, providers, health and social care staff and information for the public 2015

Reference should also be made to the North Lincolnshire: Supporting pupils at school with medical conditions- policy and procedure.

The Equality Act 2010 which superseded the Disability Discrimination Act (DDA) requires all providers to ensure policies are in place and consideration should be given to the implications the Act has on procedures and practice. NHS England has issued NICE guidance Excellence incontinence care: Practical guidance for commissioners, providers, health and social care staff and information for the public. Achieving continence is one of developmental milestones usually reached at home before the child starts a maintained education provision. In some cases, this one developmental area has assumed significance beyond all others.

Definition of disability under the Equality Act 2010:

You're disabled under the Equality Act 2010 if you have a physical or mental impairment that has a 'substantial' and 'long-term' negative effect on your ability to do normal daily activities. The condition must be substantial and long-term. It is clear therefore that anyone with a named condition that affects aspects of personal development must not be discriminated against. It is also unacceptable to refuse admission to children and young people who are delayed in achieving continence. Delayed continence is not necessarily linked with learning difficulties, however children and young people with global developmental delay may be delayed in self-cares. Education providers have an obligation to meet the needs of all children and young people. Children should not be excluded from activities because of incontinence. Admission policies which give(s) a blanket standard or statement of continence, or any other aspect of development, for all children is discriminatory and therefore unlawful under the Act. All such issues have to be dealt with on an individual basis and providers are expected to make REASONABLE adjustments to meet the needs of each child.

Where appropriate, parents/carers and school will need to agree a toilet training programme. 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/nursery in very wet or very soiled nappies/clothes

- there is evidence of excessive soreness that is not being treated

- the parents/carers are not seeking or following advice, there should be discussions with the school's designated safeguarding lead about the appropriate action to take to safeguard the welfare of the child.