St Bernadette’s EYFS INTIMATE CARE MANAGEMENT PLAN

1. Developed from the Personal Care Management checklist and where appropriate, any behaviour management plan and associated risk assessment.
2. Child/young person’s name:
3. Date of birth:

|  |
| --- |
| 1. Intimate Care Management Plan |
| 1. Reason for intimate care: 2. Due to the age of children attending Nursery/Reception, it is expected that toileting accidents will happen from time to time. For this reason at St Bernadette’s we ask all parents to give their consent for the staff to clean their son/daughter when this is needed. |
| Details of assistance required:  Where a child is unable to this for themselves, staff will assist to:   * Remove soiled clothing * Clean soiled areas * Dress child in clean clothes |
| 1. Facilities and equipment (clarify responsibility for provision of suitable environment for IC procedures and supplies, for example parent/carer/school/other):   Parents:  If toileting accidents are frequent parents are asked to supply: clean underwear and wipes  School:  The school have a small supply of clean underwear and wipes for occasional accidents.  Intimate care will be given to children in the toilet area of the Nursery/Reception as privately as possible. |
| Training needs (individual staff must keep signed/dated records of training received in addition to school and setting held records. A record should be completed when training has been delivered and kept as part of the care plan. Guidance on training provision can be sought from the PCC Learning and Communities Department):   1. Not applicable |
| 1. Curriculum specific needs:   None |
| 1. Arrangements for trips/transport:   School to take supplies of underwear and wipes on all school trips |
| 1. Procedures for monitoring and complaints (including notification of changing needs by any relevant party):   Nursery/Reception Staff will monitor any toileting issue and discuss this with parents.  Any complaints should be directed to Class or Dave Proctor Headteacher |

1. This current plan has been agreed by

|  |
| --- |
| Parent’s Name: |
| Signature: |
| Date: |

Date for review: