

Glodwick Infant and Nursery School

Continence Policy

Promoting Personal Development - Continence

Achieving continence is one of the many developmental milestones usually reached in learning before a child transfers to nursery. However we acknowledge that there may be children with longer term continence issues for whom an individual health care plan may need to be put in place. In addition there may be children joining us in school who are at various points of developing their independence in toileting who may well need short term support in this important area of self care.

Glodwick Infant School is committed wholeheartedly to working with children , parents and any support agencies deemed necessary to ensure appropriate provision is made for all children with needs in this specific area of personal development and in so doing fulfil a commitment to the promotion of our inclusive school ethos .

We accept our responsibility to meet the needs of children with delayed personal development in the same way we aim to meet the needs of children with delayed language or any other kind of delayed development. We aim to make reasonable adjustments to meet the needs of each child.

Health and Safety

In both main school and the separate nursery building there are designated areas providing a suitable place for the changing of children.

In main school this is the disabled toilet area which provides additional space for attending to a child’s personal needs.

In the nursery there is a purpose built area with washing facilities. This is an appropriate environment for attending to children who may also be wearing pull ups or nappies.

Each of these areas will have appropriate resources provided:

<u>Nursery</u>	<u>Main School</u>
1. Disposable gloves and aprons	1. Disposable gloves and aprons
2. Changing Mat	2. Changing bed
3. Wet wipes	3. Wet wipes
4. Spare nappies and/or pull up	4. Where necessary spare nappies and/or pull up
5. Nappy sacks	5. Nappy sacks
6. Separate bin for disposal of nappies in sluice room	6. Separate bin for disposal of nappies in sluice room
7. A selection of suitable spare clothing	7. Spare underwear
8. Plastic bags for wet/soiled clothing	8. Plastic bags for wet/soiled clothing
9. Antibacterial cleanser	9. Antibacterial cleanser
10. Air Freshener	10. Air Freshener

If a child accidentally wets or soils him/herself they will be attended to in either of the designated areas referred to above or in the toilet facilities in the teaching area.

Staff involved in this procedure will be expected to wear disposable gloves. Aprons provided will be considered appropriate for staff involved in nappy changing.

Wet or soiled nappies will be double wrapped and disposed of via the yellow clinical waste. Gloves and aprons and any items used for cleaning the changing area will be disposed of in yellow bags via clinical waste. (Sluice room)

Wet or soiled underwear/clothing will be returned to parents at the end of the session / day.

The changing area will be cleaned after use.

Hot water and liquid soap will be available to wash hands as soon as the task is complete. A hot dryer and/or paper towels will be available for drying hands.

Child Protection

We have no anticipation that the changing of a child either in nappies or otherwise should raise any issues of child protection as all staff have been CRB/ DBS checked. Therefore it will be normal practice for only one adult to be involved in attending to a child's personal needs. The person attending to a child will always be a member of the school staff. Students on placement will not be involved in supporting children in this area of care.

At all times staff will be encouraged to remain highly vigilant for any signs or symptom of improper practice, as they do for all activities within school.

If any marks or injuries are noticed on a child during changing this should be immediately referred to the SENCO or Head Teacher via the normal reporting procedures (see Child Protection and Safeguarding policy)

Agreeing a procedure for personal care

Parents will be kept fully informed of the procedures the school will follow should their child need changing during school time. This information will be shared at entry meetings. Admission paperwork will include parental consent for children to be changed. A copy of the school policy will be made available on the school website or is available on request.

Guidelines for staff involved in the process as detailed below will be visibly displayed in both designated changing areas. This will ensure they follow the correct procedure.

- If at all possible children should be changed standing up.
 - The child's skin should be cleaned with a disposable wipe [when necessary](#). (Re-usable cloths/ flannels should not be used to clean bottoms). [Older children may be encouraged to develop their personal hygiene skills by wiping themselves where appropriate / possible](#).
 - Nappy creams/lotions should be labelled with the child's name and only if prescribed for that child - they must NOT BE SHARED.
 - Any creams should be used sparingly as if applied too thickly they can reduce the absorbency of the nappy.
 - Disposable gloves should be worn when changing nappies. The nappy should be folded inward to cover faecal material and double-wrapped in a nappy bag. Soiled nappies should be disposed of into the yellow bag provided in the sluice room. The disposal bin should be lined with a disposable liner and emptied regularly, by the caretaker replacing the used liner. These bins are stored in a locked room, away from the reach of children.
 - Any soiled or damp clothing should be placed in a plastic carrier bag and given to parents at the end of the session/ day.
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- Once the child has been changed and removed from the changing area, the surface should be cleaned with a detergent spray or antibacterial wipes and left to dry.
- Gloves and aprons and any items used for cleaning the changing area will be disposed of in yellow bags via clinical waste.
- Hands should be thoroughly washed afterwards.

Should a child with particularly complex needs be admitted the school will work closely with the health care professionals involved in any forward planning activity.

Resources

It is appreciated that changing a child may take up to ten minutes, maybe longer in certain circumstances. In the school context of the nursery changing will be undertaken by either an early years practitioner or foundation stage TA. In main school a TA will be involved.

If, at any time, supervision of the children is deemed to be compromised in any way telephone contact with main school will ensure that additional staff are deployed immediately to enable the personal needs of any child can be addressed as quickly as possible .

Where a child has a longer term need the school's leadership team will ensure that additional resources are allocated to that area of school to enable the children's individual needs to be met.

Keys to success

A successful transition to independence in this area of self care is more likely to be achieved when we, as practitioners work closely with parents with a positive approach to supporting the child in this aspect of their development.

We will not assume that the child has failed to achieve full continence because this has not been attempted in the home. However, where this is the case we will have a positive and structured approach developed, in partnership with parents and carers, to ensure a successful outcome for a child.

If there is further concern that delayed continence may be linked with delays in other aspects of the child's development this will be sensitively discussed with parents and carers and a specifically planned programme be jointly developed and agreed.

There are other professionals who can help with advice and support. The Family Health Visitor or appropriate nurse will have knowledge of who can be contacted to offer support and advice in this area. Health care professionals can also carry out a full health assessment in order to rule out any medical cause of continence problems.

Partnership Working

In order to achieve a clear understanding of the shared responsibilities of both parents and school it may be appropriate to set up a mutual agreement which will define each others expectations. This kind of agreement should help to avoid misunderstandings that might otherwise arise and help parents feel confident that the school is taking an holistic view of the child's needs.

If this is deemed necessary issues discussed and agreed may cover the following areas.

The parent:

- Agreeing to ensure that the child is changed at the latest possible time before being brought to school
- Providing the school/setting with spare nappies/underwear, a change of clothing and any prescribed creams
- Understanding and agreeing the procedures that will be followed when their child is changed at school – including the use of any cleanser or the application of any prescribed cream
- Agreeing to inform the school should the child have any marks/rash
- Agreeing to a 'minimum change' policy i.e., the school would not undertake to change the child more frequently than if s/he were at home
- Agreeing to review arrangements should this be necessary

The School/setting:

- Agreeing to change the child during a single session should the child soil themselves or become uncomfortably wet
- Agreeing how often the child would be changed should the child be staying for the full day
- Agreeing to monitor the number of times the child is changed in order to identify progress made
- Agreeing to discuss any marks or rashes seen
- Agreeing to review arrangements

Monitoring and Review

Members of the governing body, through full or sub-committee meetings, will review this policy annually.

Signed

Review Due

Dated

Useful Oldham contacts:

Health Visting

Contact: Ruth Trickett, Team Leader (Moorside, Saddleworth Teams)

Tel: 0161 344 8172

E-mail: ruth.trickett@nhs.net

Contact: Sally Hamer, Team Leader (Werneth & Failsworth, & S Chads Team)

Tel: 0161 909 8123

E-mail: sally.hamer@nhs.net

Contact: Lisa Chalmers, Team Leader (Alexandra & Medlock Teams)

Tel: 0161 622 6541

E-mail: lisa.chalmers@nhs.net

Contact: Ruth Ramsbottom, Team Leader (S Chadderton Team)

Tel: 0161 909 8110

E-Mail: r Ramsbottom@nhs.net

Contact: Jane Holt, Team Leader (Glodwick & Royton Teams)

Tel: 0161 919 1916

E-Mail: j.holt@nhs.net

School Health Team

Contact: Dawn Mills – Team leader, Royton Health & Wellbeing Centre

Tel: 0161 362 4017

E-mail: dawn.mills@nhs.net

Contact: Suzanne Ferguson – Team Leader, Glodwick PCC

Tel: 0161 919 1923

E-mail: sferguson@nhs.net

Contact: Laura Langhorn – Team Leader, Springhead Health Centre

Tel: 0161 633 5112

E-mail llanghorn@nhs.net

Continenace Advisory Service

Chadderton Health Centre

Middleton Road

Chadderton , Oldham

OL9 0LH

0161 909 8172

Learning Disability Team

Children with Additional needs Service

Werneth PCC

Featherstall Road South

Werneth

Oldham

OL9 7AY

0161 484 1252

Early Years Advisory Team SEN/Inclusion

Quality Effectiveness and Support Team and Early Years team

CPD Annexe,
Rosary Road, Fitton Hill, Oldham
OL8 2RP
Phone: 0161 770 8620
Fax: 0161 681 5906

Further Information and Guidance

Enureris Resource & Information Centre (ERIC), Helpline: 0845 370 8008

Website www.eric.org.uk

Good Practice in Continence Services, 2000. Available free from Department of Health, PO Box 777, London SE1 6XH or www.doh.gov.uk/continenceservices.htm

Managing Bowel and Bladder problems in Schools and Early Years Settings (Guidelines for good practice), PromCon, Disabled Living, Red Bank House, 4 St Chad's Street, Manchester M8 8QA. Telephone: 0870 777 4714. Email: promocon@disabledliving.co.uk Website: www.promocon.co.uk

Keep it clean and healthy, Infection Control Guidance for Nurseries, Playgroups and other Childcare settings. Published by Pat Cole, Hartford Cottage, 1 Longstaff Way, Hartford, Huntingdon, Cambridge, PE29 1XT. Email: pat@cole-hartford.fsnet.co.uk

Name of Child:	Date of Birth:
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	COMMENTS
<p>The parent:</p> <ul style="list-style-type: none">• Agreeing to ensure that the child is changed at the latest possible time before being brought to school• Providing the school with spare nappies/underwear, a change of clothing and any prescribed creams• Understanding and agreeing the procedures that will be followed when their child is changed at school – including the use of any cleanser or the application of any prescribed cream• Agreeing to inform the school should the child have any marks/rash• Agreeing to a 'minimum change' policy i.e., the school would not undertake to change the child more frequently than if s/he were at home• Agreeing to review arrangements should this be necessary	

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	COMMENTS
<p>The School:</p> <ul style="list-style-type: none">• Agreeing to change the child during a single session should the child soil themselves or become uncomfortably wet• Agreeing how often the child would be changed should the child be staying for the full day• Agreeing to monitor the number of times the child is changed in order to identify progress made• Agreeing to discuss any marks or rashes seen• Agreeing to review arrangements	
Any Additional Issues	
Date Plan completed	Review Date
Completed by:	
Signed Headteacher/SENCO/Teacher	Date
School Nurse/Health Visitor	Date
Parent/Carer	Date
Parent/Carer	Date

Procedure for Changing Children

1. Wash hands.
 2. Assemble equipment including any provided by the parent (nappies, change of clothes, etc)
 3. Ask child to stand on changing mat.
 4. Put on gloves / apron.
 5. Remove wet/soiled nappy or clothing.
 6. The child's skin should be cleaned with a disposable wipe.
 7. Nappies should be folded inwards on themselves and double-wrapped in a nappy bag. (Dispose of nappy/pull ups in pedal bin provided).
 8. Any soiled or damp clothing should be placed in a plastic bag and given to parents at the end of the session.
 9. Once the child has been changed and removed from the changing area, the surface should be cleaned with a detergent spray or antibacterial wipes and left to dry.
 10. Gloves and aprons and any items used for cleaning the changing area will be disposed of in yellow bags via clinical waste.
 11. Hands should be thoroughly washed afterwards.
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