

Dear Parents,

Whilst in school, some young children may experience a toileting accident (wetting or soiling themselves). Consequently, in order that children remain comfortable and clean, there may be times when staff need to support your child in cleaning and changing themselves. Staff are trained to complete this sensitively and adhere to good Child Protection practices.

Parents will be informed at the end of the school day if this has happened.

If your child has a specific medical condition, then an Individual Health Care Plan would be completed in partnership with yourself, the school and school nurse.

In line with our Intimate Care Policy, please complete the permission slip and return to school office [schooloffice@poultonlancelyn.wirral.sch.uk](mailto:schooloffice@poultonlancelyn.wirral.sch.uk) by the 2rd July 2021.

Our Intimate Care policy is available to view on the school website.

Yours Sincerely

Miss Haworth

Assistant Headteacher/SENDCO

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Permission Slip for ‘Intimate Care Agreement for the Provision of Care’

Please return to school office via email [schooloffice@poultonlancelyn.wirral.sch.uk](mailto:schooloffice@poultonlancelyn.wirral.sch.uk) or in person by 2nd July 2021.

Name of Child\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please put a ‘x’ in the box

I give permission for Poulton Lancelyn Staff to change and clean my child if they have an accident and wet/soil themselves at school.

I do not give permission for Poulton Lancelyn Staff to change and clean my child if they have an accident and wet/soil themselves at school. I understand the school will contact me or my emergency contact number and will be asked to come into school to clean and change my own child/or take them home.

I understand that in the event that I or my emergency contact cannot be contacted the staff will act appropriately and may need to come into some level of physical contact in order to aid the child.

Signed

Parent/Carer\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_