



Intimate Care Policy

1. Aims

This policy aims to ensure that:

- Intimate care is carried out properly by staff, in line with any agreed plans
- The dignity, rights and wellbeing of children are safeguarded
- Pupils who require intimate care are not discriminated against, in line with the Equality Act 2010
- Parents/carers are assured that staff are knowledgeable about intimate care and that the needs of their children are taken into account
- Staff carrying out intimate care work do so within guidelines (i.e. health and safety, manual handling, safeguarding protocols awareness) that protect themselves and the pupils involved

Intimate care refers to any care that involves toileting, washing, changing, touching or carrying out an invasive procedure to children's intimate personal areas.

2. Legislation and statutory guidance

This policy complies with the Department for Education (DfE) statutory safeguarding guidance:

- [Keeping Children Safe in Education](#)
- [Early Years Foundation Stage \(EYFS\) statutory framework](#)

3. Role of parents/carers

3.1 Seeking parental permission

For children who need routine intimate care (e.g. for nappy changes or toileting accidents), parents will be asked to:

- Sign a consent form
- Provide an adequate supply of necessary items (e.g. nappies, wipes, creams, changes of clothing)

For children whose needs are more complex or who need particular support outside of what's covered in the permission form (if used), an intimate care plan will be created in discussion with parents/carers (see section 3.2 below).

Where there isn't an intimate care plan or parental consent for routine care in place, parental permission will be sought before performing any intimate care procedure.

If the school is unable to get in touch with parents/carers and an intimate care procedure urgently needs to be carried out, the procedure will be carried out to ensure the child is comfortable, and the school will inform parents/carers afterwards.

3.2 Creating an intimate care plan

Where an intimate care plan is required, it will be agreed in discussion between the school, parents/carers, the child (when possible) and any relevant health professionals.

The school will work with parents/carers and take their preferences on board to make the process of intimate care as comfortable as possible, dealing with needs sensitively and appropriately.

Subject to their age and understanding, the preferences of the child will also be taken into account. If there's doubt whether the child is able to make an informed choice, their parents/carers will be consulted.

The plan will be reviewed three times a year, even if no changes are necessary, and updated regularly, as well as whenever there are changes to a pupil's needs.

See appendix 1 for a template plan.

3.3 Sharing information

The school will share information with parents/carers as needed to ensure a consistent approach. Parents/carers are expected to also share relevant information regarding any intimate matters as needed.

4. Role of staff

4.1 Which staff will be responsible

Any roles who may carry out intimate care will have this set out in their job description. This includes Nursery Nurses, Teaching Assistants, Playworkers and Teachers.

No other staff members can be required to provide intimate care.

All staff who carry out intimate care will have been subject to an enhanced Disclosure and Barring Service (DBS) with a barred list check before appointment, as well as other checks on their employment history.

The Intimate Care Lead will:

- Oversee the implementation of this policy
- Ensure staff receive appropriate training and support
- Oversee the development of individual intimate care plans
- Act as a point of contact for parents/carers/staff regarding intimate care concerns

4.2 How staff will be trained

Staff will receive:

- Training in the specific types of intimate care they undertake
- Regular safeguarding training
- If necessary, manual handling training that enables them to remain safe and for the pupil to have as much participation as possible

They will be familiar with:

- The control measures set out in risk assessments carried out by the school
- Hygiene and health and safety procedures

They will also be encouraged to seek further advice as needed.

5. Intimate care procedures

During nappy changes, toileting and any intimate care procedure, staff will balance children's privacy with safeguarding and support needs.

5.1 Staffing

All members of staff performing intimate care procedures have an enhanced DBS with barred list check.

Only one member of staff needs to be present to change a nappy to respect the child's privacy and dignity. However, for safeguarding, another staff member must be in the vicinity, aware of the task, able to hear or see the process and sign the record sheet after care has been provided.

In cases where a pupil needs regular intimate care, where possible, the same member of staff will assist the same pupil each time they need support. We will train 2-3 members of staff per child to cover absences, emergencies and school visits. Where possible, we will ensure that these backup members of staff are also people known to the child.

5.2 Arrangements

Procedures will be carried out in designated areas only to ensure hygiene, visibility and safeguarding expectations are met:

- Pepper Hill School: EYFS changing area or the Rainbow Family Centre Accessible Toilet
- Stanton School: Accessible Toilet

Before going to perform intimate care on a child, the member of staff allocated to that child will inform another member of staff of where they are going, and leave doors open as much as privacy allows. Where possible, they should be within earshot of other members of staff, but the comfort and care of the child should be the priority when choosing a location.

When carrying out procedures, the Federation will provide staff with:

- A designated changing room
- Changing table and mat
- Handwashing facilities
- Protective gloves
- Protective aprons
- Cleaning spray and wipes
- Bins
- Nappy bags
- Spare children's clothing

Any soiled clothing will be contained securely, clearly labelled, and discreetly returned to parents/carers at the end of the day.

For pupils needing routine intimate care, the Federation expects parents/carers to provide, when necessary, a good stock (at least a week's worth in advance) of necessary resources, such as nappies, underwear and/or a spare set of clothing.

Staff carrying out intimate care must record this immediately after the task and before staff leave the care area stating the date, time, staff involved, any relevant observations such as skin integrity and if this has been reported to parents/carers if appropriate. All intimate care is documented using the approved record sheet and the completed logs to be stored in the

designated folder. Two-person verification is completed for each entry, clearly identifying the two members of staff present during the care provided and ensuring both sign to confirm accuracy.

5.3 Concerns about safeguarding

If a member of staff carrying out intimate care has concerns about physical changes in a child's appearance (e.g. marks, bruises, soreness), they will report this using the Federation's safeguarding procedures. Any concerns about the safety or welfare of a pupil will be reported immediately to the local authority's children's social care team.

If a child is hurt accidentally or there is an issue when carrying out the procedure, the staff member will report the incident immediately to the Intimate Care Lead or the Designated Safeguarding Lead.

If a child makes an allegation against a member of staff, the responsibility for intimate care of that child will be given to another member of staff as quickly as possible and the allegation will be investigated according to the Federation's safeguarding procedures.

Where the school notices an increasing pattern of soiling instances, it will first hold a meeting with parents/carers and with any other relevant individuals, such as medical professionals involved with the child to discuss why this might be occurring, and how to help the child. If the pattern continues, the school's designated safeguarding lead (DSL) will be notified. If there is other evidence which indicates a safeguarding concern, the DSL may contact the local authority designated officer (LADO), who will consider whether there is a safeguarding issue.

5.4 Specific procedures for nappy changing in Early Years

Hygiene Routines - Staff must follow strict hygiene routines before, during, and after providing intimate care. This includes:

- washing hands thoroughly before and after the procedure
- wearing disposable gloves and aprons
- ensuring all required equipment (wipes, clean clothing, nappy sacks, PPE) is prepared in advance
- maintaining the child's dignity at all times by explaining what is happening and ensuring privacy

Location - Intimate care will only be carried out within the designated changing area, which is equipped with appropriate facilities, PPE, and cleaning materials. The door must remain unlocked and positioned to maintain the child's privacy while ensuring staff visibility and safeguarding at all times.

Changing and disposal of soiled items - Staff must follow Federation hygiene and infection-control procedures when changing a child. Soiled clothing is placed in a sealed, labelled bag and returned to parents/carers at the end of the day. Disposable items such as wipes, gloves, aprons, and nappies are placed in the designated clinical waste bin. Changing mats and surfaces must be cleaned and disinfected after each use.

Record keeping - Staff carrying out intimate care must record this immediately after the task and before staff leave the care area stating the date, time, staff involved, any relevant observations such as skin integrity and if this has been reported to parents/carers if appropriate. All intimate care is documented using the approved record sheet and the completed logs to be stored in the designated folder. Two-person verification is completed for

each entry, clearly identifying the two members of staff present during the care provided and ensuring both sign to confirm accuracy.

5.5 Specific procedures for toileting accidents

Where pupils are starting school without having been toilet-trained, staff will work with the pupil's parents/carers to agree on a care plan.

The school will record the number of soiling incidents in school using the intimate care record and CPOMS, and liaise with the pupil's parent/carers about:

- The outcomes of relevant medical appointments attended by the child
- Whether there is a change in the pattern of soiling incidents, at home or at school
- Whether the current plan is working

When a child who is toilet-trained has an unexpected toileting accident, staff will respond with sensitivity and reassurance. The child will be supported to find clean clothing and, if required, staff will assist them with changing in a private and dignified manner. As the incident is unusual for the child, parents/carers will be informed. The incident will also be logged on CPOMS to support the identification of any emerging patterns or concerns.

5.6 Management of menstrual care

All staff will be sensitive to the fact that:

- Girls at our school may start to menstruate
- While there is no shame or stigma attached to this, those pupils may wish to deal with it discreetly

The school will offer sensitive and practical information to pupils about:

- Where the sanitary products are
- How to use and dispose of them correctly

Period products can be found in the medical room which staff can access discreetly on behalf of pupils. Alternatively, pupils are able to access period products including sanitary towels and tampons themselves in the accessible toilet located next to the front office.

Staff will not directly assist with the physical act of changing sanitary products unless specifically requested by the child and agreed with parents/carers in an individual care plan due to specific needs.

Age-appropriate education on puberty and menstrual hygiene will be provided as part of the Relationships and Sex Education policy.

Appendix 1: Intimate Care Plan

PARENTS/CARERS	
Name of child	
Type of intimate care needed	
How often care will be given	
What training staff will be given	
Where care will take place	
What resources and equipment will be used, and who will provide them	
How procedures will differ if taking place on a visit or outing	
Name of parent or carer	
Relationship to child	
Signature of parent or carer	Date

CHILD	
How many members of staff would you like to help?	
Do you mind having a chat when you are being changed or washed?	
Signature of child	

Intimate Care lead is responsible for ensuring care is carried out according to the intimate care plan and will oversee the review process.

Appendix 2: template parent/carer consent form

PERMISSION FOR SCHOOL TO PROVIDE INTIMATE CARE	
Name of child	
Date of birth	
Name of parent/carer	
Address	
I give permission for the school to provide appropriate intimate care to my child (e.g. changing soiled clothing, washing and toileting)	<input type="checkbox"/>
I will advise the school of anything that may affect my child's personal care (e.g. if medication changes or if my child has an infection)	<input type="checkbox"/>
I understand the procedures that will be carried out and will contact the school immediately if I have any concerns	<input type="checkbox"/>
<p>I do not give consent for my child to be given intimate care (e.g. to be washed and changed if they have a toileting accident).</p> <p>Instead, the school will contact me or my emergency contact and I will organise for my child to be given intimate care (e.g. be washed and changed).</p> <p>I understand that if the school cannot reach me or my emergency contact, if my child needs urgent intimate care, staff will need to provide this for my child, following the school's intimate care policy, to make them comfortable and remove barriers to learning.</p>	<input type="checkbox"/>
Parent/carer signature	
Name of parent/carer	
Relationship to child	
Date	