Intimate care policy

Berry Hill Primary School

Approved by:	Governing body	**Date:** May 2026
Last reviewed on:	September 2024	
Next review due by:	September 2028	

Contents

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1. Aims

This policy aims to ensure that:

- Intimate care is carried out properly by staff, in line with any agreed plans
- The dignity, privacy, rights and wellbeing of every child 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 child 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:

- Provide an adequate supply of necessary items (e.g. nappies, wipes, creams, changes of clothing)
- For children who need routine or occasional intimate care (e.g. for toileting or toileting accidents), parents/carers will be asked to sign a consent form.
- For children whose needs are more complex or who need particular support outside of what's covered in the consent 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 (where 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 once a year, even if no changes are necessary, and updated whenever there are changes to a pupil's needs.

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 contract or job description. This includes support staff and teachers.

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

All staff at the Berry Hill 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 SENCo will:

- Oversee the implementation of this policy
- Ensure staff receive appropriate 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 supported:

Staff will receive:

- Guidance 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, Berry Hill 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.

In general, 1 member of staff will be present with each child, except for circumstances where:

2 members of staff are needed to:

- Safely handle a child who needs to be assisted
- Use equipment such as a hoist

There is a known risk of false allegations by the pupil

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 also ensure there are wider staff aware to cover absence. 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 changing areas, adapted toilet areas in F2, Top Block or the hall, in class toilet cubicles if necessary.

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 school will provide staff with: gloves, aprons, cleaning wipes, spare nappy sacks, cleaning fluid and cloths if needed, access to sanitary bins.

For pupils needing routine intimate care, the school 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.

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

Instances of intimate care are recorded in the area where care has been given.

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 school'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 a member of the Senior leadership team.

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 school'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 nursery/early years

Specific guidance on procedures is on display in EYFS changing areas.

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, 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

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 available to pupils can be found at [insert 2 locations – 1 that pupils are able to access themselves, such as a basket within a pupils' toilet block, and another that staff can access discreetly on behalf of pupils, or when needing to access them to support with intimate care, such as in the staff or medical room].

Products available include [list the items you have available, e.g. sanitary towels, tampons, period pants]

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 RSE curriculum.

6. Monitoring arrangements

This policy will be reviewed by SENCo every other year or as guidance changes. At every review, the policy will be approved by the governing board.

7. Links with other policies

This policy links to the following policies and procedures:

- Accessibility plan
- Child protection and safeguarding
- Health and safety
- SEND
- Supporting pupils with medical conditions
- RSE Policy

Appendix 1: Information gathering for 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 confirm they will be provided.	
How procedures will differ if taking place on a trip or outing	
Name of senior member of staff responsible for ensuring care is carried out according to the intimate care plan	
Name of parent or carer	
Relationship to child	
CHILD	
How many members of staff would you like to help?	
Do you mind having a chat when you are being changed or washed?	
Any other comments?	
Date	

To be reviewed by:

Appendix 2: Example of parent/carer consent form

PERMISSION FOR SCHOOL TO PROVIDE INTIMATE CARE	
Name of child	
Date of birth	
Name of parent/carer	
Address and contact details	
I give permission for the school to provide appropriate intimate care to my child (e.g. changing soiled clothing, washing and toileting)	☐
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)	☐
I understand the procedures that will be carried out and will contact the school immediately if I have any concerns	☐
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). Instead, the school will contact me or my emergency contact(s) and I will organise for my child to be given intimate care (e.g. be washed and changed). I understand that if the school cannot reach me or my emergency contact(s), 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.	☐
Parent/carer signature	
Name of parent/carer	
Relationship to child	
Date	

Appendix 3: Notts County Council Intimate Care Plan format

Name **D.O.B:**		**Male/Female:** **Condition:**	
School/Setting:			
Child or Young Person's preffered method of communication:			
Does the Child or Young Person have any allergies or sensitivity *(Refer to Health Care Plan)*:			
Does the Child or Young Person require any assistance with mobility or transfers? *(Refer to manual handling assessment and subsequent safe systems of work)*:			
Does the Child or Young Person have any Religious or Cultural Needs?:			

Procedure			**Named trained staff e.g. 1:1/departmental staff**
Eating & Drinking	Assistance required at mealtimes		
	Supervised at mealtimes		
	Nasal Gastric tube feed		
	Gastrostomy feed		
	Continuous pump feed		
	Periodic pump feed		
	Manual feed		
	Other specialist feed.		
	Assistance required at mealtimes		
Airways/Suction	Oral		
	Tracheotomy		

Medication: **Emergency and /or Routine**	Epipen		
	Oral		
	Rectal e.g. diazepam, ACE procedure		
	Suppository		
	Supervised medication		
	Administered		
	Supervised		
	Dressings		
Toileting	Rectal procedure e.g. enema		
	Catheterisation		
	Supervised catheterisation		
	Pad change (day and/or night)		
	Menstruation		
	Assistance with toileting		
	Supervised toileting		
Personal Care	Washing		
	Showering		
	Dressing		
	Cleaning e.g. gastrostomy site		
	Teeth		
	Shaving		
	Hair / styling		
	Lotions/creams		
Behavioural	Social/emotional		
	Sexual awareness		

SAFE SYSTEM OF WORK			
IT IS ASSUMED THAT THE NAMED STAFF FOLLOWING THESE SYSTEMS OF WORK HAVE BEEN TRAINED TO CARRY OUT ALL TECHNIQUES DOCUMENTED			
PROCEDURE:			
Pupils Level of Ability			
Independent		Fully assisted 1 carer	
Independent /supervised		Fully assisted 2 carers	
Partially assisted 1 carer		Fully assisted more than 2 carers	
Environment Required E.G. Adapted bathroom, Medical room, Bedroom, Dining room			

Equipment Required E.G. gloves, toiletries, special crockery/cutlery
Detailed Description of Procedure

Date Assessed	
Assessors Signature	
Pupil / parent / guardians signature	
Proposed review dates:	

Appendix 4: Standing change guidance

Standing Nappy or Pant Change: Simple How-To Guide.

A standing nappy or continence pant change should always be carried out in a calm, respectful and child-centred way. Schools should follow their safeguarding, intimate care and health & safety policies at all times.

Before You Start

- Check the child's care plan or agreed toileting/intimate care arrangements.
- Make sure another member of staff knows you are carrying out intimate care, in line with school policy. You could communicate this with a discrete sign.
- Gather everything you need before starting:
    - Clean nappy or continence pants
    - Gloves and apron
    - Wipes or disposable cloths
    - Disposal bags
    - Spare clothing if needed (or in the morning, ensure all items are in changing space)
- Wash hands and put on PPE (gloves/apron).

Supporting the Child

- Speak to the child in a calm and age-appropriate way.
- Explain each step before you do it.
- Encourage the child to do as much as they can independently.
- Maintain dignity and privacy throughout the change.

Carrying Out a Standing Change

1. Support the child to stand safely, using grab rails or a stable surface if available.
2. Verbally direct or help the child lower clothing and remove the soiled nappy or pants carefully, placing items in an appropriate bag.
3. Clean the child from front to back using wipes or disposable cloths.
4. Place used items straight into a disposal bag or appropriate bin.
5. Verbally direct or help the child step into or put on the clean nappy/pants.
6. Support the child to pull clothing back up and wash their hands.

After the Change

- Remove gloves and apron safely and dispose of them correctly.
- Wash your hands thoroughly.
- Clean any surfaces according to school hygiene procedures.
- Record the change if required by the school's intimate care policy.
- Inform parents/carers of any concerns such as rashes, soreness or unusual marks, following safeguarding procedures.

Good Practice Points

- Always protect the child's dignity and privacy.
- Never leave a child unattended during intimate care.
- Use positive, reassuring language.
- Follow manual handling guidance if physical support is needed.
- Report any safeguarding concerns immediately using school procedures.

Appendix 5: Display information for changing areas

Guidelines for Changing Children September XXX

· Where possible, children should be changed standing up or by independently accessing the variable height changing table (hygiene suite) to avoid staff lifting children.

· Disposable gloves should be worn when changing nappies.

· If lying down, children should roll their legs to allow staff to access nappies – to reduce lifting.

· The child's skin should be cleaned with a disposable wipe (provided by parents/carers/guardians)

· Nappy creams/lotions should be labelled with the child's name and used only if prescribed for that child (by their parents). They must not be shared. A wipe should be used to scoop cream from the pot to avoid contamination to the cream.

· 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 bin provided. The disposal bin should be lined and emptied daily, replacing the used bin liner.

· Any soiled or damp clothing should be placed in a plastic carrier bag in the bin provided in the hygiene suite.

· Once the child has been changed and removed from the changing area, the surface should be cleaned with an antibacterial detergent spray or wipe and left to dry.

· Gloves, apron and any items used for cleaning the changing area will be wrapped and disposed of via domestic waste.

· Hands should be thoroughly washed afterwards.

· Complete the intimate care record.