



Our Lady of the Rosary Primary School

Intimate Care Policy



Introduction

There are times when a child may require a change of clothes whilst at school. The purpose of this policy is to provide clear guidelines and procedures for providing the intimate care of all children, including procedures for staff changing or supporting the changing of children in these circumstances.

These guidelines and procedures apply to changing a child in a range of circumstances, for example:

- When a child needs their nappy changed or has wet or soiled themselves due to still toilet training
- When a child has wet or soiled themselves due to having not reached continence as part of a specific medical condition or global developmental delay
- When a child has been vomited on or is wet or soiled themselves
- When a child has become dirty or wet from involvement in play activities, for example; painting or water play
- When a child requires support and assistance changing for physical activities.

These guidelines are designed to promote good practice and safeguard children and practitioners. These apply to everyone involved with the intimate care of children within Our Lady of the Rosary Primary School.

Aims:

- To include all young children in activities regardless of their ability to manage their own personal care.
- To safeguard the rights and promote the welfare of children
- To provide guidance and reassurance to staff whose role includes intimate care
- To assure parents that staff are knowledgeable about personal care and that their individual concerns are taken into consideration.
- That no child is discriminated against.

Intimate Care Tasks – cover any task that involves:

- Dressing and undressing
- Cleaning - including intimate parts
- Helping someone use the toilet
- Changing nappies
- Carrying out a procedure that requires direct or indirect contact to an intimate personal area.

Procedures - EYFS

In EYFS we recognise that children will join us having reached differing levels of independence and development in toileting and self-care:

- Children are changed whenever the need arises – if they have soiled or are visibly wet. Young children are not left in soiled or wet nappies, ‘pull-ups’ or pants, as we have a ‘duty of care’ towards children’s needs and this could be interpreted as neglect.
- Key persons/teachers from the child’s class undertake to change the children
- Changing areas are warm and there are safe and clean areas to lay children down if they need to have their bottoms cleaned.
- Each child has their own nappies, ‘pull-ups’ and wipes accessible in the changing area that are left at school and checked by staff and parents to ensure there are enough each day.
- Gloves and an apron are put on before changing commences and the areas are cleaned after each use.
- A clean and comfortable changing mat is used in the changing area for the children.
- All staff are familiar with the hygiene procedures and carry them out when changing nappies, ‘pull-ups’ or soiled/wet clothes.
- Staff recognise that nappy changing is relaxed and a time to promote independence in young children.
- Nappies and ‘pull-ups’ are disposed of hygienically. Soiled clothing is bagged for parents to take home and placed on each child’s personal peg.
- Changing area is left clean and ready for the next child.
- Children are encouraged to take an interest in using the toilet; they may just want to sit on the toilet at first.
- Children are reminded at regular times to go to the toilet.
- New children have a general ‘induction’ tour of the toilet to make them feel safe and comfortable.
- Children are encouraged to wash their hands after using the toilet and have soap and towels to hand.

- Children can access the toilets whenever they have the need to and are encouraged to be independent.
- Children from school are reminded at regular times to go to the toilet- e.g. before and after lunch or snack times, before leaving the building for assemblies or PE
- Children are encouraged to wash their hands after each visit to the toilet and have soap and towels to hand.
- All staff are familiar with the hygiene procedures and carry them out when changing children.

However, we recognise that children develop at different rates:

- Some children will be engaged in fully developing this aspect of their self-care when they start school.
- Some children will not have had the practice that they need to use the facilities available: this could include culturally different expectations of self-care.
- Some children may start wetting or soiling themselves after they start school during the settling-in period. In these circumstances, the child's key person/teacher communicates sensitively with parents to determine if this is a temporary set-back (anxiety, arrival of new sibling, illness).

Some children will come to school with ongoing/specific physical or medical issues such as urinary tract infections or soiling difficulties. If the child requires a medical care plan the school nurse will be contacted and a meeting with parents will determine how it is best to manage the child's needs. Advice may be sought from other professionals if required.

Partnership with Parents/Carers

Staff works in partnership with parents/carers to provide care appropriate to the needs of the individual child and together will produce a care plan. The care plan will set out:

- What care is required
- Number of staff needed to carry out the task (if more than one person is required , reason will be documented)
- Additional equipment required
- Child's preferred means of communication (e.g. visual, verbal). Agree terminology for parts of the body and bodily functions
- Child's level of ability i.e. what tasks they are able to do by themselves
- Acknowledge and respect for any cultural or religious sensitivities related to aspects of intimate care
- Be regularly monitored and reviewed in accordance with the child's development

Parents/Carers of children are asked to supply the following where they are needed:-

- Spare nappies
- Wipes, creams, nappy sacks etc.

- Spare Clothes
- Spare underwear

Parental Consent

- Written parental consent must be obtained before staff undertake intimate care procedures with a child.
- On admission to Nursery or Reception, parents/carers will be asked to sign a consent form giving permission for appropriately trained staff to provide intimate care as outlined in this policy.
- For children requiring regular intimate care due to medical or developmental needs, a specific care plan will be agreed and signed by parents/carers and reviewed regularly.
- Parents will be informed of all significant incidents relating to intimate care and will be notified if any concerns arise.
- Consent forms will be stored securely in line with GDPR and school data protection procedures.

Best Practice

When intimate care is given, the member of staff explains fully each task that is to be carried out, and the reason. Staff will gently encourage the child to do as much for themselves as possible and lots of praise and encouragement will be provided when the child achieves self-care.

Dealing with body fluids – Urine, faeces, blood and vomit will be cleaned up immediately and disposed of safely using the disposal bins provided. When dealing with body fluids, staff wear protective clothing (disposal plastic gloves and aprons) and wash themselves thoroughly afterward. Soiled children's clothing will be bagged to go home – staff do not rinse any clothing in school. Children will be kept away from the affected area until the incident has been completely dealt with and cleaned. All staff maintain high standards of personal hygiene, and will take all practicable steps to prevent and control the spread of infection.

Recording and Monitoring

Every instance of intimate care (including nappy changing or support with toileting) must be recorded on an Intimate Care Log.

The log will include:

- Child's name
- Date
- Time
- Reason for change
- Name and signature of staff member(s) involved
- Any marks, rashes or concerns observed

- Confirmation that parent/carer was informed if any concerns.

Parents/carers will be informed the same day of any intimate care provided.

Intimate Care Logs will be stored securely and monitored by the Senior Leadership Team and/or Designated Safeguarding Lead.

Sensitivity and Respect

- Each child will be spoken to by name and given explanations of what is happening.
- Privacy appropriate to the child's age and situation will be provided.
- The child will be encouraged to care for themselves as far as possible.
- Items of spare clothing will be readily available in school if necessary however should be provided by parents if the child is still toilet training or has a medical condition which results in toileting accidents.
- Adults should be aware and responsive to the child's reactions.
- The dignity of the child must be respected and as far as can be, kept confidential between child, school and parent.

Safeguarding Children and Adults

Anyone caring for children has a common law duty of care to act like any prudent parent. Staff ensure that children are healthy and safe at all times.

- Adults dealing with the toileting needs of children are employees of the school and have undergone enhanced DBS disclosure.
- All staff are aware of the school's protocol and procedures following an induction and are kept informed of updates via the school's designated safeguarding lead.
- All staff have received appropriate safeguarding training and will receive support where necessary.

Roles and Responsibilities

Parents and carers are made aware of policies and procedures related to intimate care and all specific instances related to their child. If it becomes evident that a child has an ongoing problem that requires regular intimate care intervention, the school will make arrangements with the parent/carer for the long term resolution of the problem. This is likely to include a care plan that involves the parent/carer directly as well as external reference to a Health Care professional. Parents are asked to disclose any toileting or medical matters to the school upon registration so that the staff are fully aware of the child's needs before their first day of school.

Advice and Support

There are other professionals who can help with advice and support. Family Health Visitors and Community Nursery Nurses have expertise in this area and can support adults to implement toilet training programmes in the home. Health Care Professionals can also carry out a full health assessment in order to rule out any medical cause of continence problem. Parents are more likely to be open about their concerns for their child's learning and development and seek help if they are confident that they and their child are not going to be judged for their delayed development.

HOME/ SCHOOL PARTNERSHIP

In some circumstances it may be appropriate for the school to set up a home/school agreement that defines the responsibilities that each party has, and the expectations that each has for the other. This might include:

The parent:

- Agreeing to ensure that the child is toileted at the latest possible time before being brought to school.
- Providing the school with a change of clothing, wipes etc.
- Understanding and agreeing the procedures that will be followed when their child is changed at school.
- Agreeing to inform the school should the child have any rashes or marks on their intimate areas.
- Agreeing to a minimum change policy i.e. the school would not undertake to change a child more frequently than if they were at home. Children are only changed in school when they have soiled or are visibly wet.
- Agreeing to review arrangements should this be necessary.

The school:

- Agreeing to a minimum change policy i.e. the school would not undertake to change a child more frequently than if they were at home. Agreeing to monitor the number of times the child is changed in order to identify progress made.
- Agreeing to report should the child be distressed or if rashes or marks are seen on intimate parts of their body.
- Agreeing to review arrangements should this be necessary.

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