



Intimate care policy *(including nappy changing)*

This policy has undergone an Equalities Impact Assessment in line with the requirements of the Public Sector Equality Duty

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Additional School Procedure – Section 5	
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1.0 Aims and other policies and guidance

Intimate care is any care that involves washing, changing or carrying out a procedure to private parts of the body. It might include helping with washing, changing nappies, toileting and dressing, continence care or menstrual management. Most pupils can do this for themselves, but it is recognised that some can't because of their age or due special educational needs or disabilities. Intimate care also includes supervision of pupils involved in intimate self-care, if this is needed.

This policy aims to ensure that:

- Intimate care is carried out properly by staff, in line with any agreed plans;
- 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;
- The dignity, rights and wellbeing of children are safeguarded;
- Pupils with intimate care difficulties are not discriminated against, in line with the Equalities Act 2010;
- Parents are assured that staff are knowledgeable about intimate care and that the needs of their children are taken into account;
- The religious views, beliefs and cultural values of pupils and their families will be taken into account.

Other relevant CLP policies include:

- EYFS policy
- First Aid, Supporting Pupils with Medical Conditions and Managing Medication and Allergy Policy
- Health & Safety Policy
- Physical Contact in Pre-School Policy
- Procedural Policy for Managing Allegations of Abuse (of a Child) Made Against a Member of Staff
- Safeguarding and Child Protection Policy and Procedures
- SEND policy
- Pre-school Terms & Conditions as set out by each setting.

Relevant national guidance:

- [Early years foundation stage statutory framework for group and school-based providers](#)
- [Keeping Children Safe in Education](#)
- [Guidance for safer working practice for those working with children and young people in education settings](#)
- [Specific settings and populations: additional health protection considerations](#)

2.0 Roles and Responsibilities

The Trust Board

- Receive and approve the intimate care policy on a triennial basis.

The Local Governing Body (LGB)

- Review section 5 of this policy
- Ensure that the intimate care policy is published on the school website

The Headteacher

- Complete section 5 (school-specific intimate care) and bring this to the LGB on a triennial basis
- Provide appropriate training support to staff as detailed in this policy and to enable staff to fulfil their roles

- Ensure that parents are involved in the design of intimate care plans and that such plans are reviewed at least annually.
- Ensure that all intimate care procedures and processes are reviewed on an annual basis.
- Ensure requirements in this and associated policies are implemented within the school.

Safeguarding

If a member of staff carrying out intimate care has any safeguarding concerns (e.g. marks, bruises, soreness), they will report this at the earliest opportunity using the school's safeguarding procedures.

If a member of staff has concerns about an adult carrying out intimate care, they will alert the Designated Safeguarding Lead (or a Deputy DSL) or Headteacher at the earliest opportunity. These procedures are described fully in the Procedural Policy for Managing Allegations of Abuse (of a Child) Made Against a Member of Staff.

It is not appropriate for any member of staff involved in any form of intimate care to have a mobile phone or other device about their person or in the location

Seeking Parental Permission

For children who need occasional intimate care (e.g. toileting accidents), school staff will inform parents/carers at the earliest opportunity and will provide appropriate support to maintain dignity and comfort for the child.

For children whose needs are more complex or who need support, an intimate care plan will be created in discussion with parents (see section 3.2 below).

Creating an Intimate Care Plan

Where an intimate care plan is required, it will be agreed through discussion between the school, parents, the child (when possible), and relevant health professionals. The school will work with parents and take their preferences on board to make the process of intimate care as comfortable as possible, dealing with needs sensitively and appropriately. If requested, every effort will be made to provide the child with staff of the appropriate gender to support religious and dignity/comfort needs.

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 will be consulted. The plan will be reviewed annually even if no changes are necessary. The plan must be updated when there are changes to a pupil's needs.

Depending upon the level of need, intimate care might be written into an Education, Health and Care (EHC) plan (or equivalent document) rather than a separate intimate care plan or individual healthcare plan.

Appendix 1 provides a template that schools can use.

Sharing Information

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

3.0 Nappy changing (especially within pre-school and nursery settings)

In some cases, nappy changing may be required for Reception aged children or older as part of a child's ongoing care needs. Such circumstances will be managed through an Intimate Care Plan as described in this policy and constructed with reference to the following nappy-changing guidance, as appropriate.

Nappy changing within pre-school and nursery settings is more routine and so does not require individual intimate care plans. However, nappy changing in pre-schools and nurseries will be undertaken according to the following:

- Attention to safer working practices, as described in section 5 (noting the importance of a second person being in the vicinity of the person undertaking changing duties)
- Ensure that no child is excluded from participating because they may, for any reason, not yet be toilet-trained and because they may still be wearing nappies or equivalent.
- A dedicated space with privacy screening will be provided, this can be within pupil toilets.
- A changing table must be provided so that nappy changing does not take place on the floor.
- Work with parents and carers towards toilet training, unless there are medical or other developmental reasons why this may not be appropriate at the time.
- Provide nappy changing facilities and exercise good hygiene practices to accommodate children who are not yet toilet trained.
- See toilet-training as a self-care skill that children have the opportunity to learn with the full support and non-judgemental concern of adults.

When nappy changing within pre-school and nursery settings, Coastal Learning Partnership schools will follow these procedures:

- Encourage young children from three years to normally wear pull ups, or other types of trainer pants, as soon as they are comfortable with this and if their parents agree.
- Support and promote toilet training routines which are informed by parents, providing steps and toilet seats as appropriate.
- Provide a warm changing area with a safe changing table for children and ensure the area has privacy from other children.
- Provide steps so that children can get on and off the changing table themselves as well as reaching the sink to wash their own hands.
- Ensure that nappy changing is relaxed and a time to promote independence in young children and that the changing room has stimulating images on the wall for children to look at.

The following are staff responsibilities when nappy changing within pre-school and nursery settings:

- Staff change all the nappies or 'pull-ups' of the children in their care every three hours, or more frequently where necessary.
- Staff are required to wear the gloves which will always be provided for them.
- All staff are familiar with hygiene procedures and carry these out when changing nappies.
- All staff never turn their back on a child or leave them unattended whilst they are on the changing table.
- Staff are gentle when changing; they avoid pulling faces and making negative comments about 'nappy contents'.
- Staff do not make inappropriate comments about children's bodies when changing their nappies.
- Staff talk with the children during this time and share nursery rhymes.

Parental responsibilities include:

- Supporting their child to be as independent as possible at school;
- Working with the school in the production of detailed intimate care plans, where needed;
- Communicating with the school about their child's needs and changes to routines at home.

4.0 Staff Deemed Responsible for Providing Intimate Care

A post holder who is expected to carry out intimate care will normally have this set out in their job description. Where this doesn't feature in a job description, it can be agreed upon through negotiation. Only paid employees can carry out intimate care, the exception to this being where the parent supports school staff with intimate care.

Employees that carry out intimate care will have undergone the full breath of enhanced safeguarding and disclosure checks as described in the Safer Recruitment and Safeguarding Policies. These checks will be recorded on the school's Single Central Record.

Staff training

Staff will receive:

- Training in the specific types of intimate care they undertake;
- Training from suitably qualified professionals where medical procedures are required;
- Regular safeguarding training;
- If necessary, manual handling training (including the use of equipment where required) that enables them to remain safe and for the pupil to have as much participation as is possible.
- Necessary PPE.

They will be familiar with:

- The control measures set out in risk assessments carried out by the school;
- Contents of intimate care plans relevant to their work
- Hygiene and health and safety procedures.

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

5.0 School-Specific Intimate Care Procedures

All schools must consider the following when determining their intimate care arrangements:

- When a child requires intimate care, there will usually be two adults involved:
 - One adult provides the direct assistance as required, minimising direct assistance as much as possible to encourage independence and respect personal dignity; this will be the named and designated adult and will be familiar to the child;
 - A second adult, who is aware of the task to be undertaken, should be in the vicinity and visible and/or audible but not in such a way that would undermine the child's personal dignity.
- In exceptional circumstances, it may not be possible for the named and second designated adult to be present. In such circumstances, appropriate mitigation will be put in place for the protection of the child and adults; any other adults engaged will be familiar to the children.

- Any soiled clothing will be contained securely, clearly labelled, and discreetly returned to parents at the end of the day.
- Accurate records will also be kept when a pupil receives intimate care. These will be brief but will include date, time, and any comments, such as changes in the child's behaviour. It will be clear who was present in every case.

The following summarises how intimate care will be provided at Baden-Powell and St. Peter's CE Junior School, noting that specific detail will be provided on Intimate care Plans as appropriate:

6.0 Intimate care procedures:

When a child requires intimate care, there will always be at least two adults present. In exceptional circumstances, it may not be possible for two people to be present and mitigation will be put in place.

These will be carried out in the disabled toilet situated in the Year 3 practical area. When carrying out procedures, the school will provide staff with protective gloves, cleaning supplies, changing mats, and bins.

For pupils needing routine intimate care, the school expects parents to provide the school expects parents to provide spare clothes and wipes. Any soiled clothing will be contained securely, clearly labelled, and discreetly returned to parents at the end of the day.

Accurate records will also be kept when a pupil receives intimate care or has an invasive medical procedure. These will be brief but will include date, time, and any comments, such as changes in the child's behaviour. It will be clear who was present in every case.

Where parents do not provide this equipment, schools reserve the right to charge parents for the use of school consumables in line with the Charges and Remissions Policy.

7.0 Monitoring Arrangements

This policy will be reviewed by the Trust Board on a triennial basis.

Intimate care plans must be reviewed annually by the Headteacher (or delegated member of staff).

Appendix 1: An example intimate care plan that schools can use.

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 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	
Signature of parent or carer	
Date	

This plan will be reviewed annually but can be updated as required.

Next review date: