



Intimate Care Policy

Approved by			
Date	Sept 26	Next review due	Sept 27

Summary of Changes

Version	Date	Summary of Changes	Approved By
2	Sep 26	Added paragraph 4.3 on intimate care on educational trips. Legal frameworks have been updated.	William Overton (Director of Early Years)

Contents

Heading	Page
Notes on Document Control/ Legal Framework	3
Aims	4
Role of Parents/Carers <i>2.1 Seeking parental permission</i> <i>2.2 Creating an intimate care plan</i> <i>2.3 Sharing information</i>	4
Role of Staff <i>3.1 Which staff will be responsible</i> <i>3.2 How staff will be trained</i>	5
Intimate Care Procedures <i>4.1 How procedures will happen</i> <i>4.2 How will they be recorded</i> <i>4.3 How procedures will happen on educational trips</i>	6
Appendix 1 Template Intimate Care Plan	8
Appendix 2 Intimate Care Agreement Form	9
Appendix 3 Intimate Care Change Record	10

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Once issued, as a minimum this document shall be reviewed on an annual basis by the originating team/function. Any amendments shall be identified by a vertical line adjacent to the right-hand margin.

To enable continuous improvement, all readers encouraged to notify the author of errors, omissions and any other form of feedback.

Legal framework

This policy has due regard to all relevant legislation and guidance including, but not limited to, the following:

- Childcare Act 2006
- Safeguarding Vulnerable Groups Act 2006
- Equality Act 2010
- DfE (2026) 'Early Years Foundation Stage Statutory Framework: For group and school-based providers'
- DfE (2026) 'Keeping children safe in education 2026'
- DfE (2023) 'Working Together to Safeguard Children'
- Data Protection Act 2018 / UK GDPR
- Health and Safety at Work etc. Act 1974.

Section 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 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.

Section 2: Role of Parents/Carers

2.1 Seeking Parental Permission

All parents/carers will be asked to sign an intimate care consent form (see appendix 2) before their child joins our setting. This is to ensure the school and staff have permission for the occasional intimate care (e.g. for toileting or toileting accidents) the children may need.

For children whose needs are more complex or who need particular support outside of what's covered in the permission form, an intimate care plan will be created in discussion with parents/carers (see section 2.2 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. This may include a phone call. There may be some occasions when we ask parents to arrive at the setting to assist with staff, depending on the situation.

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, cared for and safe and the school will inform parents/carers promptly afterwards.

2.2 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 twice 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 blank template plan to see what this will cover.

2.3 Creating an Intimate Care Plan

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

Section 3: Role of Staff

3.1 Which staff will be responsible

All staff at the school 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.

Any member of staff who is DBS checked has a responsibility to change a child's nappy should it be soiled. Children should be changed at lunchtime, at home time and at any other time during the day should it be necessary. The staff will keep a log of who is changed, where, when and who by on the school changing record.

3.2 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.

Section 4: Intimate Care Procedures

4.1 How procedures will happen

Children who are not yet fully toilet trained will require their nappies or pull-ups to be regularly checked and changed. This is to take place on arrival at the setting, in the morning, lunch time, and the afternoon and before home time.

Nappies or soiled clothing should be changed in cubicles in classroom toilets or in the nursery toilets changing area. For older children the disabled toilets can be used to allow more privacy. If necessary, the child should lay on a changing mat or bed and not on the floor. Privacy and dignity should be maintained at all times. No other children should be able to see the intimate care taking place. The welfare room will also be used with the support of the welfare officer.

Parents should provide nappies, nappy sacks, wipes and spare clothing for children who may require it throughout the school day.

Soiled nappies should be double wrapped and placed in the hygienic disposal unit or bin with a yellow bag.

Full PPE will be worn by staff. This includes aprons, gloves and mask. The changing area should be cleaned after use. Hot water and soap should be available to wash hands after the task has been completed. Paper towels should be available for drying hands.

If a child is unduly distressed about having their nappy changed, parents should be contacted to discuss the matter. A plan should be put into place for individual children, which can include a social story.

If staff notice injuries or marks on a child during intimate care, they should follow the procedure as outlined in the child protection policy and inform somebody from the safeguarding team.

Two members of staff will be needed to perform intimate care. One should be the assistance whilst the other should take the role of an observer, unless further adult help is

required.

Children should be encouraged to help themselves as much as possible.

Mobile phones, smartwatches, tablets, or cameras must never be brought into changing areas or used during intimate care procedures.

4.2 How will they be recorded

Staff will need to complete the intimate care change record (see appendix 3) sheet after performing intimate care on a child. The following will need to be recorded:

- Name of child
- Date
- Time
- Why? (Soiled, wet, or dry)
- Any additional notes
- Main changer
- Witness

These records should be kept and secured in a locked area.

4.3 How procedures will happen on educational trips

The principles of dignity, privacy, and safety outlined in this policy apply equally during educational visits and off-site learning.

Intimate care will only ever be provided by designated school staff who hold an enhanced DBS with barred list check; parent volunteers, helpers, or external staff are strictly prohibited from changing children or assisting with intimate procedures.

Before any trip, the lead teacher will ensure that intimate care needs are incorporated into the risk assessment, identifying accessible changing facilities—such as individual disabled or family toilets—that offer a private, clean, and secure space away from the general public.

Where formal facilities are unavailable during outdoor learning, staff will establish a designated, screened-off area that ensures the child's privacy is fully maintained.

Staff will bring mobile changing mats, adequate PPE (gloves and aprons), and sanitary disposal bags, ensuring all routine hygiene protocols and log-recording procedures are completed as normal.

Appendix 1: Template 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 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	
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	
Date	

This plan will be reviewed twice a year.

Next review date:

To be reviewed by:

Appendix 2: Intimate Care Agreement



Intimate Care Agreement

Name of child:

- I give permission to Western House Academy staff to support my child with personal care. This may involve supervision of a child changing or cleaning themselves.
- Where possible the staff members will guide the child to manage their personal care independently.
- If my child needs to be changed then I understand that the member of staff will be wearing full PPE.
- I will provide my child with changes of clothes and wipes which will be kept in their bag.
- I will support the school to help my child develop independence skills.
- I have detailed, below, any specific information regarding my child's intimate care:

Additional Information:

Signed: _____ Parent/Carer Date: _____

Signed: _____ (Staff member) Date: _____

Appendix 3: Intimate Care Change Record

Date	Child's Full Name	Time	Why? Any additional notes? Soiled (S) Wet (W) Dry (D)	Changer	Witness